

DANISH RED CROSS

# GUIDELINES ON MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN MIGRATION AND DISPLACEMENT



## Guidelines on mental health and psychosocial support in migration and displacement

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**Danish Red Cross**  
**Blegdamsvej 27**  
**2100 Copenhagen O**  
**Denmark**  
**+45 35 25 92 00**  
**info@rodekors.dk**  
**www.rodekors.dk**

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Developed by MHPSS and migration advisors, Danish Red Cross.

Chief editors: Kristine Benthien Frederiksen, Mette Norling Schmidt and Louise Steen Kryger.

Editors and reviewers: Carole Daudelin, Pernille Hansen, Hans Storgaard, Emma Jane Moss, Pia Lorentzen, Sanja Pupacic, Sarah Harrison, Michelle Engels, Noemi Monu and Brian Brady.

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Design: Michael Mossefin/Paramedia/13223

Front page photo: Noemi Monu

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We highly appreciate all the National Societies and individuals who contributed to this guidance note with case studies, learnings, and experiences. We are grateful to those who contributed with photos and inspiration for the activities included, and to those who did reviews of the guide. We would like to thank the Danish MFA for funding the development and production of the guidance note, and Paramedia and Lingo24 for supporting layout and translation into Arabic and French.

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Please contact the Danish Red Cross if you wish to translate or adapt any part of Guidelines on mental health and psychosocial support in migration and displacement. We welcome your comments, feedback and questions at: [mesch@rodekors.dk](mailto:mesch@rodekors.dk) / [loskr@rodekors.dk](mailto:loskr@rodekors.dk)

Please visit the PS Centre website at [www.pscentre.org](http://www.pscentre.org) for a full list of available materials on doing MHPSS, including in migration contexts.

# OVERVIEW OF CONTENT

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## **PART 1 THE GUIDELINES** • 4

Introduction • 5

Migration, displacement, and the movement • 6

MHPSS and the movement • 7

MHPSS in migration and displacement • 8

Is MHPSS in migration and displacement different than other contexts? • 9

Our way of working • 14

Key principles for promoting mental health and psychosocial well-being • 17

Putting the principles into practice • 23

MHPSS activities which can be used in all contexts • 23

Recommendations and points to consider in specific situations • 24

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## **PART 2 THE ACTIVITIES** • 29

Introduction • 30

Key points to consider when doing MHPSS activities in migration contexts • 31

Sensitisation • 32

Arts and Crafts • 33

Sports, Relaxation, and Recreational Activities • 34

Community Engagement Activities • 35

Types of activities • 35

Activity template • 40

Activity handbook • 42

Arts and Crafts • 43

Sports, Relaxation, and Recreational Activities • 60

Community Engagement Activities • 67

Inspiration for activities • 69

In depth MHPSS knowledge • 70

# PART 1

# THE GUIDELINES



# INTRODUCTION

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## THE GUIDANCE NOTE

These guidelines will support DRC staff working in contexts of migration and displacement to design, review and organise mental health and psychosocial support (MHPSS) interventions with the National Society in the country. Links are provided throughout the guideline, referring to more comprehensive and detailed resources.

People migrate for a variety of reasons. They may be forced to flee their usual places of residence, displaced by conflict or disaster, they may move in search of better or safer life opportunities, or to reconnect with family. Regardless of the reasons, migrants and displaced populations often face increased vulnerability while on the move, in countries of destination, or upon return to countries of origin.

Many migrants and displaced persons may find themselves in stressful and frightening situations, facing extreme hardships which they have little or no control over. Most have experienced violence, sometimes even torture, sexual exploitation, and sexual violence. Forced labour and risks of human trafficking are also high. While on the move, migrants may be vulnerable to different protection risks such as arbitrary arrest, detention, abuse, trafficking, and sexual and gender-based violence (SGBV). These risks may be particularly high for specific groups such as unaccompanied children and women travelling alone.

This document focuses on providing psychosocial support (PSS) for migrants and displaced persons in various situations and contexts. It contains guidelines based on experiences working with Migration and displacement as well as with MHPSS within the Movement, and it also outlines key recommendations for conducting MHPSS activities in different migration and displacement-related contexts. Finally, this document includes an activity handbook, providing concrete how-to guidance for doing MHPSS-related activities with migrants in a variety of contexts.

# MIGRATION, DISPLACEMENT, AND THE MOVEMENT

**T**he Red Cross and Red Crescent Movement's (the Movement) humanitarian imperative is to support people in crisis, with particular focus on the most vulnerable. People in contexts of displacement or migration often face severe challenges, putting them at heightened risk for increased vulnerability or the exacerbation of existing vulnerabilities.

The Movement has a long-standing history of working with and is committed to meeting the needs of migrants and displaced persons. The IFRC's 2009 Policy on Migration and the Global Migration Strategy 2018-2022, which guides our work, makes it clear that our approach to migration is based on needs, informed by rights, and bound to the Movement's Fundamental Principles. Our work with migrants and displaced populations therefore stems from recognition of their humanity, irrespective of legal status, and their attendant needs and vulnerabilities.

Migrants and displaced persons, whether en-route or at destination often lack support systems and experience marginalisation and stigmatisation. They may have little or no financial resources, increasing the potential for harmful coping strategies to obtain these. Lack of information, uncertainty about immigration status, and potential hostility from host communities are all factors that lead to additional stress. Migrants who return without success in reaching their goal may face stigma and discrimination in their own communities, in addition to the traumatic experiences they may have experienced during the migration journey. All these situations and experiences can increase the mental health and psychosocial needs of migrants.

## CASE

### Undocumented Migrants in Transit in Niger

Niamey, Niger is a crucial crossroads of transit and temporary stay for migrants en-route or returning, and a key point along the notoriously dangerous Central Mediterranean migratory route towards Libya and the Mediterranean. Through the AMiRA Programme, Niger Red Cross (NRC) has supported migrants by establishing a community center in Niamey in which weekly activities have been implemented by MHPSS staff and volunteers. The activities aim to enhance and/or protected physical and psychological wellbeing of migrants, returnees, and host community members along the migratory route.

## IMPORTANT

### Who is a migrant?

In line with the IFRC's 2009 Policy on Migration, 'migrants' are persons who leave or flee their habitual residence to go to new places – usually abroad – to seek opportunities or safer and better prospects.

IFRC Migration Policy, 2013 Migration Policy.EN.doc (ifrc.org)



### Guidance and Tools

IFRC Migration Policy  
IFRC Strategy on Migration  
Glossary of Terminology – Migration  
IFRC Humanitarian Service Points toolkit

# MHPSS AND THE MOVEMENT

**R**esponding to mental health and psychosocial needs is critical for people's survival, daily functioning and enjoyment of human rights. Such response is enabled by ensuring their access to protection and basic assistance. Mental health and psychosocial needs exist along a continuum ranging from positive mental health, to mild and temporary forms of distress, and to chronic and more severely disabling mental health conditions. Mental health and psychosocial support (MHPSS) interventions contribute to psychosocial wellbeing, foster resilience,



## CASE

### Internally Displaced Persons in Camp Settings in South Sudan

Due to conflict and social and economic instability, young people in South Sudan face chronic unemployment and poverty, as well as deficient public services and decaying infrastructures. They face challenges in education, building social networks and in gaining social skills, leading to severe psychosocial needs. The South Sudan Red Cross (SSRC) has been implementing a programme called “The Resilience Programme for Young Men” to support young people to build hope and skills to cope with everyday life empowering them to take more active roles in their communities.

and aim to promote five essential principles: a sense of safety, calmness, self- and community-efficacy, social connectedness, and hope<sup>1</sup>. At the RCRC Conference of Delegates in December 2019, the Movement reiterated its commitment to making MHPSS an integral part of its humanitarian response by adopting the Movement Policy and Resolution on MHPSS.

The Movement works to ensure that MHPSS is mainstreamed throughout all sectors, meaning that all interventions are psychosocially sensitive and do not cause further aggravation of mental health and psychosocial concerns, and that MHPSS is implemented as an integrated component in projects.



### Guidance and Tools

The Movement resolution on addressing mental health and psychosocial need (2019)  
The Movement policy on addressing mental health and psychosocial need (2019)

1) These are known as the Hobfoll principles. See, Hobfoll S.E. and al, “Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence”, *Psychiatry* 70(4), Winter 2007

# MHPSS IN MIGRATION AND DISPLACEMENT

## THE EXPERIENCE OF MIGRANTS

Migrants often face extreme hardships and danger in their place of origin, during their journeys, and sometimes in their new home or upon return. When people must flee unexpectedly, for example, when displacement is prompted by violent events, their stress is compounded.

While on the move, migrants can be exposed to a range of threats. These include human rights violations, abuses, sexual exploitation as well as the dangers posed by traffickers, unscrupulous smugglers, armed groups, and in some cases, treacherous desert and sea crossings. They may be separated from family or lose friends or loved ones. People on the move, especially but not only children, become more vulnerable to abuse, exploitation, and neglect. The ways in which migrants experience and respond to

### IMPORTANT



#### How the Movement works with migrants

The Movement's principles of neutrality, independence and impartiality mean that we take no stance on whether migration should or should not occur and that we seek neither to encourage nor discourage people's movement. We seek to address needs, reduce vulnerabilities and mitigate risks wherever it is found. This is in line with the principle of universality, ensuring that everyone is aware of and able to access their legal rights to protection and assistance. The Movement policy for working with and for migrants sets out a series of programming principles which should be respected and used to guide MHPSS programmes/interventions for migrants.

[https://oldmedia.ifrc.org/ifrc/wp-content/uploads/2020/10/Advisory-Note-Risks-of-Migration\\_EN.pdf](https://oldmedia.ifrc.org/ifrc/wp-content/uploads/2020/10/Advisory-Note-Risks-of-Migration_EN.pdf)





loss, pain, disruption, and violence vary significantly and may affect their mental health and psychosocial well-being in different ways, increasing their risk of developing mental ill-health.

For those who are newly displaced, challenges such as being in an unfamiliar environment, the inability to satisfy basic needs in a predictable way, and facing insecurity and an uncertain future, can be sources of constant worry. In protracted displacement or migration situations, the lack of prospects for durable solutions perpetuates uncertainty and can cause feelings of deep frustration and anxiety. Additionally, having to rely on external help to survive weakens people's self-efficacy\*, self-esteem, sense of identity, and of dignity. In turn, the psychological effects of displacement can hamper people's ability to adapt to the new situation, as well as their ability to regain autonomy. Migrants and displaced persons may also find themselves marginalised, discriminated against, and stigmatised in efforts to rebuild their lives. This often happens because host communities and authorities view them as a burden or as potential security threats.

## CASE

### Returnees to Country of Origin in Ethiopia

Every year thousands of Ethiopian migrants travel to the Arabian Peninsula and Gulf countries in search of better economic opportunities. For many, their return can be very difficult and distressing due to them having witnessed or been exposed to harmful incidents such as violence, torture, and abuse. "Failed migration" by returnees often leads to stigma and discrimination upon return, leading to increased stress and vulnerability. The Ethiopian Red Cross (ERCS) is implementing the "Assistance and Resilience to Vulnerable Returnees and their Communities project" with the aim to contribute to building the resilience of vulnerable returnees utilising a holistic approach, through provision of basic assistance, livelihoods, and psychosocial support. Beneficiaries embark on several vocational and business management trainings, participate in basic and focused MHPSS activities such as life skills, psychoeducation, and peer support, and individuals' progress is monitored through well-being surveys. This has demonstrated significant personal development and improved well-being.

## IS MHPSS IN MIGRATION AND DISPLACEMENT DIFFERENT THAN OTHER CONTEXTS?

In many aspects MHPSS methods and implementing activities and programmes in the context of migration and displacement is the same as in other emergency and non-emergency contexts, largely relying on the same tools and guidelines. However, there are several important factors that must be considered when implementing MHPSS interventions in migration and displacement contexts. These will be described in the "key recommendations" section below.

Each component of the Movement responds to mental health and psychosocial needs in accordance with its role and mandate. The pyramid model<sup>2</sup> represents the framework of mental health and psychosocial support services that are required to address the needs of individuals, families, and communities in all contexts.

\*) Self-Efficacy is a person's particular set of beliefs that determine how well one can execute a plan of action in prospective situations (Bandura, 1977). To put it in more simple terms, self-efficacy is a person's belief in their ability to succeed in a particular situation. Read more about the theory of "Self-efficacy" from Bandura here [Self-Efficacy Theory | Simply Psychology](#) and an example of the Hobfoll principles here [Returning to School using the 5 Principles of Recovery \(epinsight.com\)](#)

2) Movement works both in emergencies and non-emergency contexts, the IASC 2007 intervention pyramid has been adapted for use by the Movement. For more information about the Pyramid see, [https://pscentre.org/wp-content/uploads/2021/07/iasc\\_rrcc\\_pyramid-2.pdf](https://pscentre.org/wp-content/uploads/2021/07/iasc_rrcc_pyramid-2.pdf)



“ I really enjoy coming to the center. Today we learned to make jewelry and I made some things that I will try to sell later. Life here in the camp is not easy, before I used to have my own house and kitchen and garden. Now, we live in one tent with the whole family. And that is why I really like to come and learn new things, we sit together, talk about our children and laugh often. ”

- Aichatou, participant in activities at community centre in Niamey, Niger -

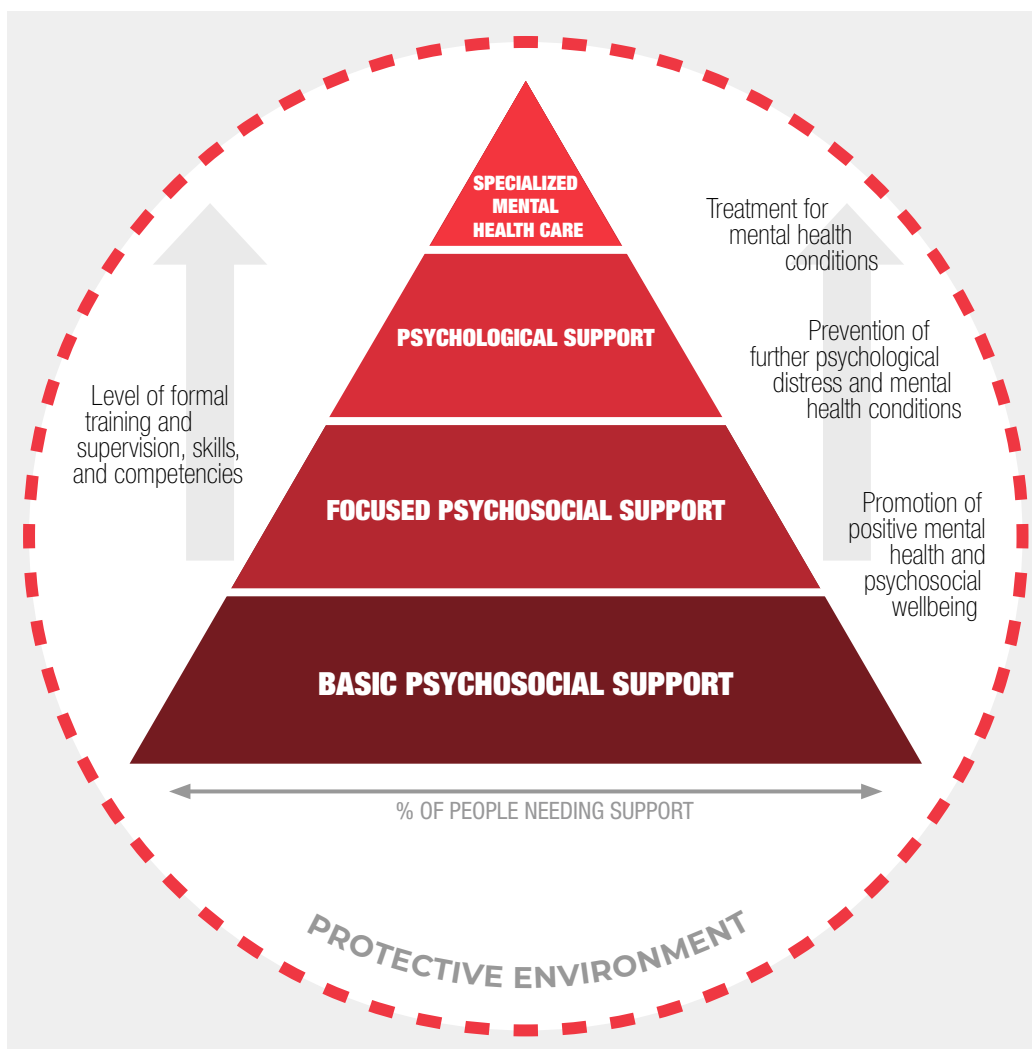


Figure 1: International Red Cross Red Crescent Movement Framework (The Pyramid)

As illustrated in Figure 1 the Movement’s MHPSS Framework places all layers of the pyramid within a **protective environment**. All components outlined are equally important, however the protective environment component is crucial. Without a protective environment it is impossible to address the MHPSS needs of affected individuals, families and communities and we risk doing harm with our work. Therefore, the protective environment must be considered every time we consider providing MHPSS. Useful information for ensuring a protective environment can be found in the [safe and dignified referrals pocket guide](#) and the minimum standards for [Protection, Gender and Inclusion \(PGI\)](#).

The **four layers of the Pyramid** are used to guide interventions and prevention at all stages of a response and serve as a reference in the programming phase. The key to organizing MHPSS is to develop a layered system of complementary support that meets the needs of different groups. This multi-layered approach does not imply that all Movement components must provide services in all layers. However, interventions should consider linkages to aspects of all layers of the Pyramid even if chosen activities only actively address one or two of the layers.

- The **first layer of the Pyramid** consists of basic psychosocial support that promotes positive mental health and psychosocial well-being, resilience, social interaction and social cohesion activities within communities. Activities are often integrated into health, protection and education sectors and should be accessible to 100% of the affected population. This could include psychological first aid (PFA) and recreational activities. Basic psychosocial support can be provided by trained Red Cross and Red Crescent staff and volunteers and/or trained community members.

- The **second layer of the Pyramid** is focused psychosocial support, and entails promotion of positive mental health and psychosocial well-being and prevention activities, with a specific focus on groups, families and individuals at risk. Examples of activities include peer support, group work, structured activities for children, support groups, and the debriefing of staff and volunteers. Focused psychosocial support can be provided by trained and supervised Red Cross and Red Crescent staff and volunteers and/or trained community members.

- The **third layer of the Pyramid** includes prevention and treatment activities for individuals and families who present with more complicated psychological distress and for people at risk of developing mental health conditions. Examples of activities include basic psychological interventions, such as counselling or psychotherapy, which are usually provided in health-care facilities with accompanying outreach work or in community facilities, where this is culturally acceptable.

- The **fourth layer of the Pyramid** refers to specialised clinical care and treatment for individuals with chronic mental health conditions and for persons suffering such severe distress and over such a period that they have difficulty coping in their daily lives. Examples of activities include treatment centers for survivors of torture and alternative approaches to drug therapy. Services are provided within State healthcare and social welfare systems and in detention facilities by psychiatrists and psychologists.

DRC works mainly with **community-based psychosocial support** responses, that aim to strengthen existing or build new support systems within communities, for example by supporting local volunteers, establishing referral mechanisms, or working with religious institutions.



## CASE

### The asylum system in Denmark

The number of people seeking asylum in Denmark has fluctuated a lot over the years. In mid-2020 there were around 1500 asylum seekers in the Danish asylum system. The average period in the asylum system is a little more than two and half years. Many asylum seekers face both physical and psychological challenges during this time. Danish Red Cross (DRC) has administrated asylum centres in Denmark since 1984 through a contract with the Danish government. Most asylum centres are in rural areas. Numerous organizations and volunteers from surrounding communities engage in activities both at the asylum centres and outside the centres. One of DRC's main activities is to run schools at the centres. People receive allowances to buy food (if not provided) and private living expenses. The DRC asylum centres host both families with children, unaccompanied children, and women and men who arrive alone.

The asylum centres strive:

1. To integrate the five elements of MHPSS into all guidelines and procedures, whether it concerns the reception of new asylum seekers, the activities for unaccompanied children, school or internships for adults or voluntary activities.
2. To build courage to approach the future wherever it is, and to spend the time it takes for the authority to process asylum cases, in meaningful and forward-looking ways.

Community-based psychosocial interventions are in the first and second layers of the pyramid. Support systems are critical for people's well-being, especially when faced by adversity and when navigating difficulties which risk to negatively impact their lives. Migrants in transit, at destination, and upon return, may have lost traditional support structures such as extended family and community networks or may be in situations where they are not part of any community. Being on the move particularly increases the risk for certain vulnerabilities, as there is less opportunity to engage with stable environments or communities. The loss of structures and networks may impact their perception of self-efficacy, their feelings of connectedness, as well as their sense of safety and hope. Additionally, loss or separation bring about feelings of uncertainty and powerlessness. Migrants may live in constant dread of what might have happened to their loved ones but are unable to change the situation or keep their loved ones out of harm's way. It is important to recognise that the ambiguity of the situation may be the most difficult to cope with<sup>3</sup>. Interventions must be adapted to fit the ever-changing environments in which migrants often find themselves and must consider the often limited timeframe that actors have to work with populations on the move.



#### Guidance and Tools

- DRC safe referral pocket guide
- IFRC minimum standards for protection, gender and inclusion in emergencies
- IFRC Supplementary Guidance on Policy on Migration
- The MHPSS pyramid
- Psychosocial support for people separated from family members

3) From IFRC PS Centre Broken Links: Psychosocial support for people separated from family members (A field guide) (2014) <https://pscentre.org/wp-content/uploads/2017/03/Broken-Links-Field-guide.pdf>

# OUR WAY OF WORKING

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**P**roviding sensitive, safe, and effective MHPSS within migration and displacement contexts requires that we work in ways that ensure the needs of vulnerable migrants are met in a consistent and principled manner.

‘Do no harm’ is central to all work in the Movement, in line with our Fundamental Principles. The imperative to do no harm poses particular challenges in migration response work for a variety of reasons. The most serious harm that we anticipate when engaging with migration includes loss of life or serious physical harm due to dangerous migratory journeys, migrants being unable to leave a context where life is threatened, migrants facing violence and detention from the authorities, refoulement of migrants and other involuntarily return to unsafe and unsupported contexts, and migrants at risk of exploitation, human trafficking, discrimination and racism. Harm is also caused due to migrants not having rights due to their irregular status, especially when they cannot access health, shelter, or state protection services. Therefore, we must always undertake extensive analysis of risk factors when working with vulnerable migrants to ensure we actively avoid any unintended consequences of our work. One example of this could be, to not initiate specialised mental health care or therapy to migrants on the move where follow up cannot be made, but focus on providing basic PSS aimed at promoting healthy coping skills and psychosocial well-being while preventing ill mental health with activities such as PFA, awareness raising, psycho-education<sup>4</sup>, and facilitation of activities enhancing connections to others in similar situations, or facilitating connection to loved ones.

Mainstreaming **protection, gender, and inclusion** (PGI) through all of our work involves ensuring that assistance activities also address protection needs through prioritising dignity, access, participation, and safety for all people in vulnerable and marginalised situations. PGI mainstreaming is closely related to the principle of ‘Do No Harm’. Mainstreaming PGI and following set standards directly reduces the risk of discrimination, violence, and abuse, especially in relation to the Movement support and presence. For example, in migration and displacement contexts conducting a thorough PGI analysis is essential at the design phase. Without understanding the specific needs and protection risks of groups with different genders, ages, and backgrounds we are not able to deliver relevant and effective responses.

Additionally, **social cohesion** is a cornerstone of the Movement work with migrants and host communities. From a social cohesion perspective, DRC MHPSS interventions support individuals and families to strengthen a sense of safety, calm, connectedness, and hope within their communities; while promoting individual and community efficacy and a culture of non-violence. For example, one way to promote social cohesion in migration situations is to include both migrant

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4) Movement works both in emergencies and non-emergency contexts, the IASC 2007 intervention pyramid has been adapted for use by the Movement. For more information about the Pyramid see, [https://pscentre.org/wp-content/uploads/2021/07/iasc\\_rrcc\\_pyramid-2.pdf](https://pscentre.org/wp-content/uploads/2021/07/iasc_rrcc_pyramid-2.pdf)

and host communities in MHPSS interventions. Interventions exclusively addressing the needs of migrants should be avoided, as this may lead to tension and conflict. Instead, understand the dynamic interactions between different groups, identify what connects people, and work to promote these conditions. In practice, this could include activities where individuals from different groups work together, awareness raising on the importance of inclusion of all groups or on how to address issues of stigma and discrimination. However, gathering different groups may not be appropriate in all circumstances. This is why a conflict-sensitive analysis is key to avoid doing harm and potentially instigating tensions and conflict between different groups.

## IMPORTANT



### Psychosocial assessment

Psychosocial well-being does not mean the same for all people. It is a dynamic experience that is influenced by a person's own capacity, his or her social connections, support systems, as well as the cultural norms and value systems where they live. In the very early stages of a response, it is important to establish a clear understanding of how the affected population experiences psychosocial well-being. Examples of questions that explore local meanings of psychosocial well-being include:

- How do you know when people in your community are doing well? And how do you know when they are not doing well?
- What has changed in your daily life and in the community following the crisis event?
- What were the good things in your life prior to the crisis event?
- What changes would be desirable for you and for your community in the next month and within a year? t
- How can you and your community contribute towards such changes?

You should always assess what “well-being” means for different target groups, what their coping mechanisms are, and how best to strengthen these. Further aspects to explore would be feelings of life satisfaction, defined roles and responsibilities in the family and the community, confidence in dealing with challenges, and dreams about the future.

Strengthening Resilience handbook, IFRC Reference Centre for Psychosocial Support, 2014  
<https://pscentre.org/wp-content/uploads/2018/02/Strengthening-Resilience.pdf>



### Guidance and Tools

IFRC minimum standard commitments to gender and diversity in emergency programming (2015)

The do no harm handbook (2004)

DRC programming guide: protection & social cohesion (2015)

Mainstreaming MHPSS leads to success:

“ Given the conditions and challenges that many of these returnees face, we have moved away from implementing a stand-alone approach. If you as a migrant returnee receive livelihood assistance and if you are stressed and your well-being is not good, then you are less likely to succeed with your business. With PSS we have also observed that stand-alone PSS assistance is not enough to strengthen the resilience of returnees. They also need financial support to regain hope and opportunities. ”

- Ishmael Yesuf, Sr. PSS Officer in Ethiopian Red Cross Society -



# KEY PRINCIPLES FOR PROMOTING MENTAL HEALTH AND PSYCHOSOCIAL WELL-BEING

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There is no single model to provide MHPSS to migrants and displaced persons. The possibilities for MHPSS activities and interventions vary according to contexts, as illustrated in the recommendations section. Nevertheless, to guide the responses, humanitarian organisations working in this field have developed twelve key principles for providing support to migrants.<sup>5</sup>

## 1. Treat all people with dignity and respect and support self-reliance

It is important to provide services in dignified ways with respect for the autonomy and privacy of the person. Everyone, including children, people with specific needs, or minority groups have a right to be treated with equity and without discrimination. Wherever possible, support should enable people to choose how they would like to do things, and to maintain a sense of personal control. Importantly, this includes consulting with migrants to identify their needs and capacities and building the assistance around their suggestions. This is a prerequisite for good psychosocial support but difficult to realise when people do not stay long in one place.

## 2. Respond to people in distress in humane and supportive ways

All involved in supporting migrants and displaced persons should know how to assist people in acute distress and alleviate their stress where possible. Psychological first aid (PFA) is a set of simple skills and techniques that can be used by anyone (non-professionals and professionals) to respond to people in distress.



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5) From Mental Health and Psychosocial Support for Refugees, Asylum Seekers and Migrants on the Move in Europe. A Multi-Agency Guidance Note (2015) UNHCR, IOM and MHPSS.net.

### **3. Provide information about services, support, and legal rights**

A major source of stress for migrants is the lack of information. Provision of up-to-date factual information about where and how assistance can be obtained, can greatly reduce stress in a constantly changing situation. Such information can be provided through physical access points, leaflets, radio, TV, and telephone and Internet. Helpers need to be able to provide reliable facts and refer people to places where they can obtain information. Information must be understandable for all different groups on the move, such as children, people with disabilities, people who do not read or older people. This includes ensuring that information is provided in the language of migrants.

### **4. Provide relevant psychoeducation and raise awareness**

It can be important to help migrants and displaced persons to understand the sometimes-overwhelming feelings that naturally arise from the many stressors they face. Given the potentially high mobility of this population, providing brief and practical information in languages that people in this situation can understand is helpful, including translations in the language of the migrant. Information should use everyday language and avoid using clinical terms outside clinical settings, for example terms like ‘traumatised’, ‘psycho-trauma’, or ‘PTSD’, to support people’s understanding.

### **5. Prioritise protection and psychosocial support for children, in particular children who are separated, unaccompanied and with special needs**

Unaccompanied children, those who have been separated from their family or caregivers, as well as children with special needs, such as those living with disabilities, are at particular risk of being exposed to abuse, violence, and exploitation while on the move. Their needs should be prioritised.

#### **CASE**

#### **Refugees in Camp Setting in Sudan**

Sudan hosts one of the largest populations of refugees from South Sudan in the region. More than 814,000 South Sudanese refugees live in Sudan, with the majority in camps or informal settlements having limited access to services and livelihood opportunities. For some people, pre-existing psychosocial and mental health problems have been exacerbated by traumatic experiences and suffering from war. This is exacerbated by basic and economic challenges. The Sudanese Red Crescent (SRCS) is providing a range of services in refugee camps in White Nile State – including health, WASH, shelter, and nutrition.

In 2017, SRCS staff and volunteers reported limited provision of MHPSS in refugee camps, especially for children and youth and thus SRCS conducted a detailed psychosocial needs assessment. This assessment was the basis for a plan of action to launch MHPSS activities, complementing existing SRCS interventions in camp settings, including with other stakeholders. The aim of MHPSS activities is to enhance resilience of children and their families in protracted refugee situations, and to improve access to basic services while strengthening the safety and dignity of people. In 2020, activities were extended to eight out of nine camps in White Nile State. They include recreational activities, sport, art, educational, and cultural activities to “change negative thinking”. Participants are encouraged to actively contribute and manage the community centre’s activities, thereby promoting empowerment.

## 6. Strengthen family support

Help keep families together. Where families have become separated connect them with family reunification services (Restoring Family Links). It is important that children are kept with their parents, where possible and in the best interests of the child. The migration process can undermine supportive links between family and community members. Family and social supports are the best protection in response to distress and attachment to a caring adult is a key protective factor for children. Where family reunion is not possible, alternative care arrangements should be in the best interest of the child and provide the option of returning to family or extended family as a priority. If families experience the death of loved ones during their journey, facilitate dignified burials and mobilise people from the same religious background to attend burials and support families. Families left behind also often need support, especially where a family member who has migrated has gone missing.

## 7. Identify and protect persons with specific needs

Even during short stays, people who are much more at risk than others should be identified and offered referral to protection and social services. This can, in certain cases, be lifesaving. People who may be particularly vulnerable include children who travel alone, older people, people with disabilities, pregnant women, survivors of torture, survivors of trafficking<sup>6</sup>, survivors of SGBV and persons with diverse sexual orientation and gender identity. Seek out feedback on interventions from participants and pay special attention to enabling vulnerable groups to share their opinions.



6) It can be extremely difficult to identify people who have been or are being trafficked and the risks are many. Please consult the **Pocket guide to Anti-Trafficking** for more information and guidance on how to work with survivors of trafficking.



## **8. Make interventions culturally relevant and ensure adequate interpretation**

The provision of MHPSS must be tailored to the needs of the people it serves. MHPSS helpers should therefore familiarise themselves with the background of the people they work with. Where possible, interventions should be planned with input from people directly affected by the situation. If possible, it is best to use trained interpreters from the countries of origin of migrants who are not directly connected to the migrant population (e.g., family members) to avoid putting persons in situations of bias. With training and supervision, some interpreters can have a more comprehensive role as cultural mediators. A cultural mediator serves as intermediary between a person and a service provider using knowledge of the values, beliefs, and practices within their own cultural group, along with knowledge of different care systems in the host context.

## **9. Provide appropriate treatment for severe mental health disorders**

Treatment for mental health disorders can only be provided by certified clinicians, and in accordance with national regulations. Where possible, refer people with severe mental disorders to appropriate secondary services. This may include people with pre-existing disorders in relapse or crisis, people with psychotic symptoms, people who are unable to function, or who are at risk of harming themselves or others and persons who misuse substances in withdrawal due to the crisis.

## **10. Do not start psychotherapeutic treatments that need follow up if follow up is unlikely to be possible**

A major impediment to most conventional psychotherapeutic interventions for people 'on the move' is that these often require multiple sessions, which is usually not possible. Therefore, therapeutic techniques need to be adapted as the first time you see a person may be the last. Do not inadvertently harm the person by encouraging them to talk about difficult experiences outside a stable, clinical context. Do not use trauma-focused single-session interventions, including but not limited to critical incident stress debriefing. In general, multiple session psychological therapies should only be considered when the person is in a stable situation.

## 11. Monitoring and managing well-being of staff and volunteers

Staff and volunteers providing assistance to migrants and displaced persons will be repeatedly exposed to tales of terror and personal tragedy. Volunteer work can range from helping with administrative duties in an office, to providing psychological first aid to people affected by a disaster or playing with children living in a refugee camp. The emotional toll of volunteering and working in these circumstances can be enormous. They may live and work under physically demanding and unpleasant working conditions, characterised by heavy workloads, long hours, lack of privacy and personal space. Helpers might experience moral anguish over the choices they have to make. These stressors may have adverse consequences such as anxiety and depressive feelings, psychosomatic complaints, over-involvement with beneficiaries, callousness, apathy, self-destructive behaviour (such as alcohol or other substance abuse) and interpersonal conflicts. Humanitarian workers should be alert to signs of stress within themselves and colleagues. Team managers should monitor their staff, through informal observation and periodic routine inquiry or by organising informal or formal group support sessions where they can evaluate levels of distress. A supportive, inclusive, and transparent organizational climate protects staff and volunteers.

While it is important for volunteers to recognize their own needs and reactions and to address them, it is equally important for DRC to address the needs of volunteers who are the backbone of all RCRC activities. Providing psychosocial support for volunteers can often be done at low cost, with some of the most important actions being showing appreciation. This includes ensuring that there are good support systems and structures for staff and volunteers, who may experience mental health and psychosocial effects of the work they are doing, including stress, stigma, and trauma.<sup>7</sup>

### IMPORTANT



#### Supporting staff and volunteers is fundamental

- It is essential that staff and volunteers have skills needed to carry out their tasks, and that these are reasonable, clearly explained, and well understood.
- Staff and volunteers may experience mental health and psychosocial effects of the work they are doing. Support systems and structures are essential to manage potential stress, stigma, and trauma.
- Examples of activities that care for staff and volunteers as part of the psychosocial response can be:
  - ✓ Peer support
  - ✓ Support groups
  - ✓ Training in stress management
  - ✓ Learning to identify burnout

Strengthening Resilience handbook, IFRC Reference Centre for Psychosocial Support, 2014  
<https://pscentre.org/wp-content/uploads/2018/02/Strengthening-Resilience.pdf>

7) See the IFRC Centre for Psychosocial Support [Strengthening Resilience](#) handbook.

## 12. Do not work in isolation: coordinate and cooperate with others

Many people are involved in the provision of assistance to migrants and displaced persons. Some are part of large organisations and others work alone or in small informal networks. It is important that helpers connect with each other and learn from the work others are already doing, so that their work does not overlap or leave major gaps. Mental health professionals such as psychologists, psychiatrists, counsellors, assisting migrants and displaced persons should connect with existing organisations and not provide professional MHPSS work outside a supportive organisational environment and governmental endorsed structure.

### CASE

#### Returnees in Eastern Ghouta, Syria

Eastern Ghouta located outside Damascus, Syria, has been deeply affected by conflict and fighting, causing thousands of people to flee their homes in search for safety. During the conflict water and electricity were cut off, and considerable infrastructure destroyed. Many families were separated and witnessed their loved ones killed, homes destroyed, and friends and neighbours injured. In the last three years many people have returned to Eastern Ghouta and face the task of rebuilding their lives physically and emotionally. By early 2021, there were over 230,000 returnees in Eastern Ghouta, but unemployment and poverty levels are extremely high and mental health needs severe. The Syrian Arab Red Crescent (SARC) MHPSS response is integrated into their wider humanitarian service delivery which includes health, and nutrition amongst other sectors. The overall aim of this response is for conflict-affected and most vulnerable populations have met their most essential health, psychosocial, relief, and livelihood needs. In relation to the specific MHPSS components, the response aims to see an increase in the psychosocial wellbeing of the Eastern Ghouta returnees while also considering the well-being of the volunteers. The SARC MHPSS component is integrated as a multi-disciplinary emergency response: people would often stop to ask SARC volunteers questions on all available services, not just those provided by SARC. As a system was in place, the staff and volunteers were able to provide correct information ensuring that the persons of concern would reach the relevant services. This resulted in enhanced trust and credibility for SARC.



#### Guidance and Tools

IFRC Strengthening Resilience handbook

# PUTTING THE PRINCIPLES INTO PRACTICE

## MHPSS ACTIVITIES WHICH CAN BE USED IN ALL CONTEXTS

This section puts the key principles for promoting mental health and psychosocial well-being into action. The recommendations and contexts described in this section are by no means exhaustive and are offered only as a guide for delegates. MHPSS activities and interventions should always be considered with a lense on integrated approaches that also consider other aspects of health and access to basic needs (shelter, food, and water). It is imperative that in every context the situation is properly analysed to ensure the ‘do-no-harm’ principle is upheld and recommended that technical advisors at HQ are consulted in terms of any planned activities.

<p><b>Psychological First Aid (PFA)</b></p>	<p>PFA is a set of simple skills and techniques that can be used by anyone (non-professionals and professionals) to respond to people in distress in any given migratory situation or context. Providing practical care and support to ensure migrants can address their basic needs, access support services, and obtain accurate information can be helpful in reducing stress and support migrants to make informed decisions. It will also be the first step to ensure continued support in building hope and coping with everyday life.</p>
<p><b>Mapping of referral pathways</b></p>	<p>Mapping of referral pathways for protection services and specialised mental health care is important, taking into consideration the legal rights of different migrant groups and their access to basic services (see the Safe Referral Pocket Guide for more on safe referrals – see link below). Identification and registration of children can enable their protection and save lives. Providing assistance adapted to children’s specific needs, such as help with contacting family (Restoring Family Links), guidance on their options for further support and services, legal advice, and appropriate shelter will encourage unaccompanied or separated children to register with the support system, and lessen their stress at a potentially very frightening time.</p>
<p><b>Engage with communities</b></p>	<p>Engage regularly with host community leaders as well as migrant and displaced communities in meaningful ways to ensure coherence in interventions, to support the gathering of essential information, and to contribute to improved social cohesion. Host communities remain a key resource to ensuring safety and protection for displaced communities, but often also bear a heavy burden with large groups of displaced persons overwhelming local resources. It is essential that humanitarian actors are mindful of the concerns that host community members articulate and help facilitate mutual understanding and foster social cohesion to help minimize discrimination and potential conflicts.</p>



### Guidance and Tools

- IFRC A guide to psychological first aid
- DRC safe referral pocket guide
- Basic psychosocial skills a guide for COVID-19 responders
- Practical guidance for risk communication and community engagement for Refugees, IDPs, Migrants
- Community engagement at humanitarian service points
- DIIS report with DRC 'No place for me here': The challenges of Ethiopian male return migrants
- IFRC Humanitarian Service Points
- ICRC Internal displacement in urban settings
- BRC Staff and Volunteer Pocket-guide to Anti-trafficking

## RECOMMENDATIONS AND POINTS TO CONSIDER IN SPECIFIC SITUATIONS

This table describes some of the different migration and displacement contexts where we work with our National Society partners. In addition, we have looked at specific groups of migrants considering the mental health and psychosocial needs that may arise related to their legal status (e.g., refugees, undocumented migrants) or experience (e.g., survivors of trafficking). However, the recommendations are based on an understanding of migration and displacement as dynamic experiences that lead to transitions between different legal statuses and social categories. This calls for MHPSS activities and approaches that are adaptable and respond to these changes.

Contexts of Migration and Displacement	Important points to consider	Recommendations for MHPSS response
<p><b>Country of origin: migrants, family members/ remaining community, pre-migration</b></p>	<ul style="list-style-type: none"> <li>• Often leave their place of origin alone.</li> <li>• Pre-migration context for those who remain but potentially may decide to migrate.</li> <li>• Recieve money from those who have migrated (i.e., remittances) benefitting those who remain by improving their living conditions.</li> <li>• Disrupted family life, impacting negatively on the well-being of migrant-sending households.</li> <li>• Loss of contact with loved ones, distress and uncertainty of whether family members are alive or dead.</li> </ul>	<ul style="list-style-type: none"> <li>• Support groups for families of migrants who are left behind in communities of origin.</li> <li>• Restoring Family Links,</li> <li>• Peer support activities, information, and psychoeducation.</li> <li>• Community awareness raising activities</li> <li>• Activities to address stigma and discrimination.</li> <li>• Support to the families to enable safe and dignified burial procedures.</li> </ul>



<b>Contexts of Migration and Displacement</b>	<b>Important points to consider</b>	<b>Recommendations for MHPSS response</b>
<b>Country of origin: returnees</b>	<ul style="list-style-type: none"> <li>• Often return to the same difficulties and challenges which caused migration.</li> <li>• Often affected by traumatic experiences from the migratory journey, such as violence, torture, physical and sexual abuse.<sup>8</sup></li> <li>• Feelings of difficulty, distress, regret, and shame.</li> <li>• Stigma and discrimination common due to “failed migration”.</li> <li>• Remigration due to peer pressure and lack of support upon return.</li> </ul>	<ul style="list-style-type: none"> <li>• Basic MHPSS.</li> <li>• Sports and recreational activities.</li> <li>• Focused activities addressing specific needs and the challenges of reintegration/ readjustment.</li> <li>• Life skills.</li> <li>• Support to receiving families and communities to facilitate reintegration process and social cohesion.</li> <li>• Awareness raising activities with families and communities on the hardships of returning migrants.</li> <li>• Ensure protection and security, e.g. rebuilding infrastructure and livelihoods.</li> </ul>
<b>Countries of transit – undocumented migrants</b>	<ul style="list-style-type: none"> <li>• Various groups of migrants with various migratory reasons may be in a stage of transit.</li> <li>• Short window of opportunity to support with assistance.</li> <li>• Live “under the radar” from authorities, in fear of arrest or deportation</li> <li>• Dynamic migration: duration of transit period varies.</li> <li>• Routes quickly shift and work to support those in need must be flexible.</li> </ul> <p>Undocumented migrants:</p> <ul style="list-style-type: none"> <li>• Difficult to reach due to fear of being arrested.</li> <li>• Reduced access to services and protection, making them at risk of exploitation.</li> <li>• Crackdown on migrants by the police and distrust in humanitarian workers.</li> <li>• May be in transit and stranded for an indefinite period from days to years with no plans to return.</li> <li>• May have endured undue hardships along their migratory journey, including beatings and imprisonment.</li> <li>• Arrive with few personal belongings, having been robbed or forced to leave everything behind.</li> </ul>	<p>Challenging to conduct MHPSS interventions with longer term impact.</p> <ul style="list-style-type: none"> <li>• Basic MHPSS e.g. PFA, ensuring provision of information, access to basic assistance, communication and RFL.</li> <li>• Meet migrants where they are and be able to shift location, consider setting up mobile Humanitarian Service Point<sup>9</sup>.</li> <li>• Focus on skills building or physical exercise to manage stress e.g. First Aid (medical and psychological) training, psychoeducation, life skills, sports and recreational activities.</li> </ul> <p>Undocumented migrants:</p> <ul style="list-style-type: none"> <li>• Staff and volunteers trained in PFA and are aware of concerns of target group</li> <li>• Focus on role and mandate of the Movement through outreach work, social media and various platforms used by the target population.</li> <li>• Recruit facilitators from the target group themselves to help sensitise and provide orientation.</li> <li>• Weekly activities implemented by staff and volunteers in a community centre.</li> </ul>

8) Read more about the experiences of return migrants in Ethiopia in the DIIS report: ‘No place for me here’: The challenges of Ethiopian male return migrants (diis.dk)

9) <https://media.ifrc.org/ifrc/document/humanitarian-service-points/>

<b>Contexts of Migration and Displacement</b>	<b>Important points to consider</b>	<b>Recommendations for MHPSS response</b>
<b>Migrants in urban settings<sup>10</sup></b>	<ul style="list-style-type: none"> <li>• Difficult to reach with services as they are often disbursed around the city and hard to identify.</li> <li>• Often alone and with no social networks and little knowledge of their location, where to access help and services, housing or social benefits for which they might qualify.</li> <li>• Exposed to organised crime and risks of sexual violence.</li> <li>• Precarious conditions, makeshift housing, abandoned homes without permission or other accommodation with poor facilities.</li> <li>• Risk of forced eviction or other abusive behaviors.</li> <li>• Rural migrants may not be aware of the bureaucratic hurdles of the city and have little knowledge of rights, causing further risks.</li> </ul>	<ul style="list-style-type: none"> <li>• Life skills and support for employment opportunities</li> <li>• Link to other migrants with similar backgrounds and nationalities.</li> <li>• Social integration, thereby contributing to the minimization of protection risks.</li> <li>• Outreach work providing information on available services, stress management, and protection risks.</li> <li>• Recruit facilitators from target group themselves to help sensitize and provide information.</li> <li>• Recreational activities, potentially with host community members for social cohesion.</li> <li>• Humanitarian service points.</li> <li>• Safe referral mechanisms to link with local existing MHPSS services.</li> </ul>
<b>Displaced populations in camps settings (including IDPs and refugees)</b>	<ul style="list-style-type: none"> <li>• Displaced for several years</li> <li>• Often in camps losing control over own decisions in life, becoming highly dependent on humanitarian aid.</li> <li>• Different reasons such as disasters and conflict.</li> <li>• Youth in IDP camp settings face problems in adapting to their new setting.</li> <li>• Life in IDP camp may endure for years with uncertain futures.</li> <li>• Rising tensions with host communities nearby if host community is excluded from services.</li> <li>• Youth in particular face a range of psychosocial problems: persistent fears and anxiety, sadness, aggression, and somatic symptoms.</li> <li>• Risk of adopting harmful coping mechanisms such as substance abuse.</li> <li>• Experiences of war and suffering coupled with basic and economic challenges causing increased levels of stress and mental health problems.</li> <li>• May have movement restrictions, affecting dignity and sense of control resulting in increased frustration and feelings of powerlessness.</li> </ul>	<ul style="list-style-type: none"> <li>• Protracted stay in camps requires activities providing structure and the strengthening of individuals.</li> <li>• Activities that promote dignity and well-being, the feeling of safety and encourage connectedness among the participants.</li> <li>• Life skills workshops for young men and women, resilience activities, and youth led initiatives.</li> <li>• Recreational activities including sports.</li> <li>• Non-formal education for children, psychoeducation, PFA, meaningful cultural activities.</li> <li>• Social cohesion activities.</li> <li>• Analyse camp dynamics between residents to avoid contributing to reinforcing arbitrary structures thereby doing harm or potentially overlooking vulnerable populations.</li> <li>• Targeting host communities should also be considered.</li> <li>• Sometimes relevant to provide services such as health, WASH, shelter, and nutrition.</li> <li>• Detailed psychosocial needs assessment.</li> <li>• Do not promote camps as permanent shelter solutions but do respond to the needs of people living there.</li> </ul>

10) [https://international-review.icrc.org/sites/default/files/irrc\\_99\\_16.pdf](https://international-review.icrc.org/sites/default/files/irrc_99_16.pdf)

<b>Contexts of Migration and Displacement</b>	<b>Important points to consider</b>	<b>Recommendations for MHPSS response</b>
<b>Refugees/ Asylum Seekers</b>	<p>Asylum seekers</p> <ul style="list-style-type: none"> <li>• Have left country of origin and formally applied for protection in another country, but application yet to be concluded.</li> <li>• Usually in stressful situations with future about to be determined: little or no control of own situation.</li> <li>• Arrive with courage and strength, but as time passes and asylum cases remain undecided, maintaining a positive view of future and coping becomes more difficult.</li> <li>• Might risk rejected claims for refugee status and face deportations or return to countries of origin.</li> </ul> <p>Refugees</p> <ul style="list-style-type: none"> <li>• As well as may be the case of asylum seekers, refugees have fled war, violence, conflict or persecution and have crossed an international border to find safety in another country.</li> <li>• Have asked for protection in this country and has been given refugee status.</li> <li>• Both must adjust to life in a foreign country, which might have cultural and language differences.</li> <li>• Lack of resources required for coping and managing life, which may result in potentially contributing to stress.</li> </ul>	<ul style="list-style-type: none"> <li>• Interventions making life in a new country less stressful.</li> <li>• Link to education agencies and organisations who conduct language classes.</li> <li>• Sensitisation on local customs and culture.</li> <li>• Life skills activities that enhance own self-efficacy.</li> <li>• Information and orientation on rules and regulations, as well as legal rights.</li> <li>• Activities to promote social cohesion.</li> <li>• Psychosocial aspects of employability and other skills for labour market (re) integration.</li> <li>• Activities accounting for various scenarios and outcomes of asylum seekers' cases.</li> <li>• MHPSS activities contributing to strengthened coping mechanisms regardless of outcome of asylum claims.</li> </ul>
<b>Rejected asylum seekers who cannot be returned to their country of origin</b>	<ul style="list-style-type: none"> <li>• Are in a protracted or permanent state of limbo, and unable to plan for future.</li> <li>• Under constant pressure to be returned to country of origin by authorities.</li> <li>• Limited by factors such as lack of access to employment, education and free movement, impacting well-being and levels of stress and frustration.</li> <li>• Can be divided according to specific situation, whether alone or with family, and whether voluntarily cooperating concerning return.</li> </ul>	<ul style="list-style-type: none"> <li>• Restricted opportunities to work with target group due to their circumstances.</li> <li>• Skill building activities and life skills activities promoting improved self-confidence, responsibility and capacity to reduce the feeling of stress and hopelessness.</li> <li>• Promote family unity ensuring that effective support systems are in place.</li> <li>• Activities with the aim of fostering social cohesion, a sense of dignity and well-being, reducing stress and conflicts in departure centres.</li> <li>• Gender segregated social activities to protect vulnerable women and promote their participation.</li> </ul>

Contexts of Migration and Displacement	Important points to consider	Recommendations for MHPSS response
<p><b>Survivors of trafficking (migrants in trafficking networks)</b></p>	<ul style="list-style-type: none"> <li>• One of the most invisible vulnerable groups.</li> <li>• Lack of freedom and under control of smugglers or traffickers, preventing access to support services.</li> <li>• Heightened risk of re-trafficking and serious mental health and psychosocial needs.</li> <li>• National Society staff trained in sensitivity and heightened protection risks with a comprehensive “do no harm” analysis, done prior to providing MHPSS services.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure safe referral pathways and that partners are comprehensively mapped and made as accessible as possible.</li> <li>• Support survivors of trafficking accessing appropriate and safe shelter, legal services and MHPSS interventions at levels 3 &amp; 4 of the MHPSS Pyramid.</li> <li>• In case of unavailable services, explore possibilities for community based mental health care.</li> <li>• Protection risks are many: it is mandatory to consult the Pocket guide to Anti-Trafficking<sup>11</sup>.</li> </ul>

11) BRC Staff and Volunteer Guide to Anti-trafficking – pocket-guide – Trafficking Response (trafficking-response.org)



ARMENIAN RED CROSS

## PART 2

# THE ACTIVITIES



# INTRODUCTION

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This section suggests potential MHPSS activities which could be conducted with migrants and displaced populations. While these activities are meant to be general and applicable in most situations, it is always important to consider the particular context where you are working and to select the most appropriate activities for the work that you are doing.

These activities should be **operational for both staff and volunteers** working with MHPSS within the context of migration and displacement. They are inspired by a selected number of topics and grouped under **physical activities, games and sports, arts and crafts, and community engagement**. Activities will thereby inspire a focus on health, creativity, community, and may be oriented towards adults, youth, children and families. The handbook also contains **references to other relevant resources** to consult while doing MHPSS activities in migration and displacement contexts.

## FACTS

- The majority of people affected by emergencies will experience psychological distress, which for most people will improve over time.
- Amongst people who have experienced war or other conflict in the previous 10 years, one in 11 (9%) will have a moderate or severe mental disorder.
- One person in five (22%) living in an area affected by conflict is estimated to have depression, anxiety, post-traumatic stress disorder, bipolar disorder or schizophrenia.
- People with severe mental disorders are especially vulnerable during emergencies and need access to mental health care and other basic needs.
- Nearly two-thirds of people with known mental health and psychosocial needs do not seek help, due to lack of access to care and treatment and stigma, and about 80 % of those with known mental health conditions are unable to access quality affordable care.

WHO 2019

# KEY POINTS TO CONSIDER WHEN DOING MHPSS ACTIVITIES IN MIGRATION CONTEXTS

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- **Addressing psychosocial subjects:**
  - This will often be more accepted in the community when done through other activities or opening discussions instead of doing purely psychosocial education.
- **Organizing activities together with the health team:**
  - The health team starts with an Information, Education, and Communication (IEC) session about a topic identified together with the community (e.g., malaria, food poisoning, alcohol- and drugs abuse).
  - The MHPSS team takes over and repeats rules or lets participants present the rules: there will always be new people to involve in the ongoing activities.
  - Do a small presentation game to get to know everyone before an activity begins.
- **Be careful with activities that may cause a form of re-traumatization:**
  - Some of the activities in the catalogue may evoke strong emotions, memories, and experiences. This could be through creative sessions, through roleplay sessions, or through community engagement activities.
- **In advance, do an assessment on gender perceptions and attitudes towards the activity:**
  - If it will be more appropriate, split men and women.
  - Be aware of differences in languages and possible communication difficulties between receiving and arriving community, potentially ask volunteers to translate.
- **Assess what “well-being” means for different target groups:**
  - What are their coping mechanisms and how can they best strengthen these?
- **Make efforts to raise issues and gaps in basic services with authorities:**
  - This should be based on the beneficiaries’ feedback through established feedback systems.
  - Advocate for improvement, including access to livelihood in safety and dignity.
- **If you do not feel prepared or comfortable doing the activities:**
  - Do not do certain activities if you do not feel prepared or comfortable doing them.
- **End every session with a relaxation exercise:**
  - This will be a way to calm the mood at the end of a session.
  - Note that this may not always be possible with migrants who stay and engage with an activity only very briefly.
- **Debrief when having finished an activity session:**
  - You should debrief with the community and/or the participants.
- **Safe and dignified referrals:**
  - Make sure to do safe referrals to other support systems either within the movement, to other organizations, a reliable health system offering MHPSS, or other forms of support and services.

## INSPIRATION

### Ensuring dignity in Eastern Ghouta, Syria

To ensure dignity and maintain confidentiality, it is essential that individuals requiring specialized services do not repeat their stories to multiple people before reaching the appropriate person that can provide the needed service. Case managers had the technical skills to provide specialized services or identify and refer to additional support.

# SENSITISATION

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While engaging in the activities, you will have an opportunity to address and raise awareness about other sensitive topics such as assessing MHPSS needs, Life Skills, and child resilience. The activities may also function as an entry point for doing MHPSS activities with participants such as PFA and psychosocial support. In the chart on page 68, you can find inspiration from the PS centre's resource library to familiarize yourself with topics such as Child Resilience and doing MHPSS with persons separated from family in order to be able to engage in conversations about these topics while doing activities.

The hands-on how-to activities from the activity handbook will be a way for you to encourage migrants and beneficiaries to participate in one or more sessions, allowing for access to talk about mental health, and how they can receive further support, if and when they feel like.

**If you do not feel fully prepared for doing the activities in this catalogue, you should not do them.**

You can find tips on **how to address basic MHPSS needs** and learn how to engage with activities addressing the subject, as well as how to do **MHPSS needs assessments**.

## INSPIRATION

### Talking about emotions in Niger

In Niger, the MHPSS team found that doing something practical, while discussing MHPSS, made the dialogue flow better. The practical aspect could be a game on emotions or drawing emotions. It could also be making cushions while talking about sleep, and brainstorming on ways to care for oneself as part of a session on "self-care".



# TYPES OF ACTIVITIES

## IMPORTANT



### Disclaimer

Pay attention to the group that you are doing MHPSS activities with. Not all activities may be applicable for all the migrants that you will meet. Reconsider doing the suggested activities when you are working with:

- **Undocumented migrants:** For undocumented migrants, bringing personal items with them on the migration journey may do harm. Undocumented migrants, who are often in transit, will be in different legal situations and various, sometimes unforeseen, circumstances throughout their migratory journey. Bringing e.g. a personal journal diary may not be advisable when personal information is at risk of being shared, compromising the migrant's position.

Undocumented migrants may not feel safe participating in activities involving the local community for fear of being exposed to harm from members of the community or being reported to the authorities.

- **Survivors of trafficking:** Migrants who have been exposed to harm such as abuse and violence in circumstances of trafficking may be in strong need of PFA and other MHPSS-related sources of support before they can engage with activities involving the local community.

- For many migrants, doing certain kinds of activities may evoke strong emotions. Going through your own personal story may stimulate memory and storytelling skills, but it may also remind you of harmful and traumatic experiences. **It is important that facilitators know how to do safe and dignified referrals to further MHPSS-related support.**

## ARTS AND CRAFTS

These activities can work well to enable migrants to create something for the centre or to bring with them on their further journey such as paintings, dreamcatchers, shelves, clothes, boardgames, journals, etc.

**Advice:** Try as much as possible to recycle (instead of buying material for the activities: e.g., cans to make shelves, cans to make games, bottles, old magazines, newspapers for paper machinery, bottle stoppers, toilet paper rolls, jars, etc.)

**Note:** It may not always be advisable for migrants to bring self-made products with them along their journey. Materials such as personal journals could help migrants keep track of thoughts and narratives, but these could also be a legal trip-up for them in circumstances where it may be used against them. Remember that a migrant's position may change along the migratory



NOEMI MONU / DRC

journey and activities they engage in should provide a safe space and not do harm neither when doing the activities nor upon moving further. Make sure to reflect with the migrants upon the consequences of carrying personal items with them so they can make informed decisions.

## SPORTS, RELAXATION, AND RECREATIONAL ACTIVITIES

These activities are often done as an introduction, as warming up exercises, and hereafter linked to a specific objective such as conflict resolution, collaboration, empathy, expressing and interpreting emotions, etc. Relaxation activities at the end of the day is advised in order to encourage calming of the body and mind by doing for example, physical stretches, breathing or dancing. Some of these sessions can be done without guidance, sometimes with a specific theme to focus on e.g., when doing theatre activities. Create and perform music, dance, drama, etc. for the community on issues that are relevant to them.

**Advice:** Consider for what purpose you are doing for example a football match: what are the opportunities for development to a migrant? How might a football match or a theatre performance be used as an entry point with migrants? It is important to make sure that football matches are not one-off and stand-alone activities: it should always be linked to further support opportunities

### INSPIRATION

#### Using existing resources for activities in Niger

Try to explore which resources exist in the migrant/host community. In Niger, several courses in sewing were conducted by tailors, while a jewellery maker facilitated an activity in jewellery making, and a couple of carpenters lead a session on making chess/dam boards (cutting the wood, drawing the board, etc.) and also made shelves for the migration centre. A woman who previously followed a bakery course facilitated a session on bakery, while others did hairdressing and make-up. In a floods project, local older women taught the young ladies to make carpets, while young men learned to make fishing nets from the older generation.

either offered by the Movement or provided through referrals. Arrange to play matches continually for migrants to engage with sports activities. Replay the theatre piece until all participants are satisfied with the result. Make sure to always do a debriefing with the participants.

**Note:** Always make sure that participants and public participants can quit whenever they want. You should agree upon a stop signal. Be aware that football matches may cause conflicts because it entails a winning and a losing team. It could also be a point of departure for conflict among migrants with different nationalities, stirring hostility instead of friendship and positive relations. Doing roleplay as part of theatre sessions could evoke strong emotions for migrants who have experienced trauma. Safe and dignified referrals should always be possible in these circumstances, and it is important to let migrants know where they can go to seek support.

## INSPIRATION

### Relaxation activities

**Take care of yourself:** Regardless of your external surroundings, your mental health should always be taken into consideration. This guide provides suggestions on how to take care of yourself and prioritize your mental health, which can all be used throughout your daily routines.

**Sleep for coping:** Sleep disturbances are normal reactions to abnormal events. During periods of stress, crises and disasters, it is important to get enough sleep in order to clear your mind for dealing with adversity during the day. This flyer serves as a guideline that provides information and suggestions on how to sustain proper sleep during times of distress.

IFRC Psychosocial Centre <https://pscentre.org/>

## COMMUNITY ENGAGEMENT ACTIVITIES

These activities may consist of projects done, migrants and host community members together, such as clean-up campaigns, repair work, and presenting the result of the activities to each other.

## INSPIRATION

### Life Skills

Life skills are psychosocial skills and abilities that make it easier to meet life's challenges and crisis events in a realistic, positive, and constructive way. Life skills may be directed towards oneself and others, and in relation to actions in changing the environment. Life skills support psychosocial well-being, promoting good communication, positive thinking, analytical skills and goal setting, cooperation, and coping.

Life Skills handbook, IFRC Reference Centre for Psychosocial Support, 2013 Life-Skills.pdf ([pscentre.org](https://pscentre.org/))

**Advice:** For these activities, it is a good idea to consult the local community and ask for which purposes they could use some help from the migrants. This will give migrants an opportunity to experience a sense of efficiency by contributing to the local community in terms of some of the activity ideas listed above. At the same time, it will provide the local community with a sense of ownership over local needs, projects and initiatives. Bringing in representatives from the local community can also enhance the relation between members of the local community and the migrants.



**Note:** Migrants may not be welcomed by members of host communities. Establishing positive relations with the local community may therefore be a challenge that could potentially hurt a migrant’s position. In some cases, the local community may feel that initiatives favour migrants, although the communities are also in significant need. It is important to be sensitive around potential tensions between migrants and host communities and roll back any activity that may damage the goodwill of the migrants within the local community.

### IMPORTANT



#### Understanding culture and language

Volunteers should understand refugees’ cultures and languages and be selected from the refugee community. However, it is important to involve the receiving community, aim at peaceful coexistence and joint use of resources. Hence, all volunteers are selected equally from both groups.

### INSPIRATION

#### PSS response and programming in Eastern Ghouta, Syria

The SARC PSS response is integrated into their wider humanitarian service delivery which includes health, and nutrition amongst other sectors. The PSS response includes a PSS mobile team which provides the full SARC PSS package including structured and unstructured PSS programming at one of the two schools available. Having a safe space, as well as people to confide in, has aided families and individuals to find their place within the community. SARC has also established a community centre in one of the East Ghouta locations to expand its services to meet the much-needed PSS needs. This includes establishing information points to provide a variety of services including identify and link families and individuals in need of services, protection cases (e.g., UASC), provide updated information on available services from SARC, and other providers..



#### Guidance and Tools

Assessing mental health and psychosocial needs and resources  
 Mental health and psychosocial support Assessment Guide  
 Life Skills handbook

### Tips for MHPSS activities

- **Establish an Information Point to provide a variety of services** including identify and link families and individuals in need of services, protection cases (e.g., UASC), provide updated information on available services from the RCRC National Society, and other providers.
- **Establish a Safe Space** to provide a range of services including implement age-appropriate recreational and creative activities for children and for youth, conduct awareness sessions, including risk awareness, activities for caregivers, provide PFA, link to a Case manager (if needed).
- **Establish a Case Management System;** Deploy Case managers to temporary shelters, refer cases, identified at Information Points, Safe Spaces or during home visits by the Mobile Teams, to the case manager; case manager to make detailed assessments and develop follow-up plans; case managers to follow up on protection cases and family reunification
- **Continuous humanitarian diplomacy and coordination;** Regularly map available services and referral pathways to be able to provide timely information to refugees
- **Set up a PS Emergency Hub at HQ to facilitate Case Management.** Share daily reports between the Hub and Case Managers about the number and status of protection cases; collate and analyse information from the different locations and identify possible links (crucial for timely family reunification efforts); link and coordinate with focal points within the NS (established for the response); collate and analyse needs of beneficiaries and coordinate timely delivery of services.
- **Capacity building of PSS teams:** Develop guidelines on safe referral, home visits, awareness raising/ psychoeducation sessions, recreational and social activities for communities and establishment of youth friendly spaces. Identify and train volunteers on PFA, Community Based Psychosocial Support (CBPSS), protection and referral.
- **Youth empowerment activities:** Establish a buddy system – identify respected and skilled community members who can provide support to youth to learn new skills, empower them to find their role and be more active in the community, e.g., elderly who will teach youth traditional craft.
- **Establishing and running Child friendly Spaces (CFS)** e.g., in the refugee camps; Involve the community and all relevant stakeholders in the CFS site selection and activity planning and implementation; conduct home-visits to caregivers, focusing on health awareness session, education, hygiene and child protection, provide clothes and shoes to the most vulnerable children.
- **Ensure immediate support is provided to the newly arriving refugees;** Train volunteers in the entry border points to provide PFA to people in distress and identify the most vulnerable persons and refer (unaccompanied and separated children).
- **Establish a community center:** with separate rooms for confidential consultations with a nurse and to discuss a private matter with NS PS staff and volunteers trained in PFA and basic psychosocial support and a child-friendly space with toys and a volunteer to take care of participants' children.

## Running MHPSS activities

**Information:** Information must be timely and relevant. All members of teams must be briefed, at least at the beginning of each shift and updated, as information changes quickly. Provide culturally appropriate and easily understandable information

**Coordination:** PSS in emergencies is never stand-alone. It is an integral component of a multi-disciplinary response. Although oftentimes time-consuming, a concerted effort is essential to ensure that all sectors are working together, that sectors are complementary and that gaps can be quickly identified and filled.

**Referral system:** An emergency response will require specialized services to be available. In PSS teams, persons of concern, identified at Information Points or during home visits, are referred to case managers, who are trained to provide or refer to specialized services.

**Support to PS teams and volunteers:** Systems need to be in place to minimize staff and volunteers feeling frustrated and stressed. These include ensuring they are provided with food and water, that there is a quiet place to rest, and rotating schedules. Also recommended are regular team briefings and a buddy system.

**Adaptations along the way:** Need for flexibility and adaptations during program period.

**Ensuring access:** Ensure activities in the community centre are accessible to all people. Ensure activities are age, gender and culturally appropriate and planned and organised by youth with the support of PSS teams. Address protection concerns that youth are facing (e.g., SGBV, early and forced marriage) with all relevant groups such as community leaders, stakeholders, caregivers and youth.

**Sustainability:** Appreciation items should not be given after each session with youth to avoid creating wrong expectations and motives for participation; activities in the centre should not be based on toys and equipment, but encourage more recycling, traditional games, and ways of supporting.

**Protection issues:** Focus on child protection and inclusion of the most vulnerable children (orphans, unaccompanied and separated children, children with disabilities). Explore ways of addressing protection concerns such as early marriage, school drop-out, child labour, and GBV, through sport, art, cultural and sport activities.

**Participation and ownership:** Support existing community committees and youth committees and empower them to address their own challenges and explore solutions for protection risks. Make sure that planning of activities involves all community groups and leaders, as to ensure local acceptance and ownership and to avoid any harm. Involve and support receiving community, reinforce links through sport, etc.

**Choosing creative activities:** Recreational, sport, art, educational and cultural activities are excellent way for children, youth and other groups to get together, discuss, learn various life skills and efficient way to “change negative thinking”.

## IMPORTANT



### Good facilitation skills:

**BE INCLUSIVE:** activities should be done in groups together, facilitators and participants all doing the activities together.

**PROVIDE OWNERSHIP:** the migrants may also facilitate some of the activities such as jewelry-making if this is something that the migrant is experienced in and have skills that can be shared.

**INSPIRE YOUTH ENGAGEMENT:** Engage youth to participate in all stages of program design, implementation (through volunteering), and evaluation – to give them a voice and be a vehicle for change.

**FOCUS ON ACTIVE LISTENING:** Facilitators must be empathic and have good listening skills. They must be able to guide participants in an empowering way. They create an enabling social space for interactions and provide a supportive environment.

**BE AN ENABLER:** Facilitators are helping – helping participants to express themselves, to explore and learn. Relating topics to participants’ own lives is essential, as this transforms the learning process from being pure acquisition of theoretical knowledge towards understanding and integration of new skills.

**USE YOUR PEOPLE SKILLS:** Facilitators must be warm and supportive, respectful of opinions and able to support and guide participants, taking care not to dominate activities. This requires training of the facilitators’ “people skills”.

12) Life-Skills.pdf (pscentre.org)



IFRC

# ACTIVITY TEMPLATE

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You can use the activity template on next page as a point of departure for starting activities that have no fixed procedure such as the **Community Engagement Activities** in this handbook. The template provides a simple overview of the basic components that need to be considered before starting an activity such as: what is the activity about? How much time does it require? Who is it for and with? And which resources will you be needing?

The template can also be useful, especially when you are engaging groups of people who are going to cooperate in an activity: for instance doing activities with migrant beneficiaries and members of the local community with the aim of social cohesion and integration.



**Title:**



**Who makes it happen?**

Who is needed to create the activity? Is it the target group itself, volunteers, staff relatives and friends or a mix? Please describe their roles and actions.



**Partners & Friends:**

Are any other partners needed to realise the activity? This could be local government, private businesses, associations etc.



**The Activity!**

Write a short description of the idea for the activity.



**Time:**

What time of day and/or year is the activity best suited for? Does it require certain weather? Do the beneficiaries need it to be at a specific time of day? Consider:

- Does the activity follow a sequence, where one activity builds upon another?
- Is it a stand-alone activity, which can be implemented any time?



**Who is it for?**

Who is the target group? Is it specifically for beneficiaries of the project, or does it also involve the host community? Do they have a special interest or age?



**Resources:**

What resources do you need to do the activity? This could be location, materials, a location, equipment finance etc.



**Location of the activity:**

Does the activity require a specific location? Can it be done at home, outdoors, in public facilities, or can it be done anywhere?



**Special needs:**

Are there any special challenges or needs of the beneficiaries to be aware of? This could be challenges with mobility, costs, physical strength, allergies etc.



**Physical health:**

In which ways does the activity help improve the physical health of the participants?



**Mental wellbeing:**

How does the activity help to improve the mental wellbeing of the participants?



**Insights and tools:**

How does the activity help the participant better understand and maintain their health - both physical and mental health? How does the activity support the participants' sense of opportunity in life and in society?

# ACTIVITY HANDBOOK



# ARTS AND CRAFTS

Please make sure to read *Types of activities* before starting any of the suggested activities.

## My Journal Diary



Full day.  
One or more sessions



**Aim:** To provide an opportunity for participants to recall and express positive memories, experiences and dreams, which will stimulate their memory, creative, and narrative skills. Moreover, using creative methods to enable the exploration and unfolding their creative skills.

The journal is a personal item that participants can take with them and use when and as they feel like.

### Key learning objectives:

Enhance coping mechanisms

Self-awareness

Stimulation of memory

Understanding, accepting, and managing emotions



**Target group:** participants from 12 years. Children with help from adults or volunteers.



**Materials:** A4 paper (folded) • Cardboard • Old magazines • Needle and thread • Painting / color pencils • Scissors • Glue



**How to:** What do you need to prepare in advance?

1. Materials.
2. Awareness raising session on stress and stress management.

Background materials:

Read more about **reactions to stress and distress** as well as **how to facilitate activities in situations of stress and distress**. You can also read more about how to deal with **children's stress**.

Process:

1. Explain to the participants that for this activity, they are all going to create their own personalized journals with thread, paper, and cardboard. This can be done by gluing or stitching collages together from old magazines and fabrics or by coloring.
2. Mention that it will be possible to take the personalized journal with them as something to continue using by drawing or writing in it whenever they feel like it.
3. During the session(s) of creating the journal, participants may discuss stresses/fears in their daily lives and how to manage or reduce this stress: the facilitator leads and supports participation in these conversations.
4. Underline that it is not necessary for the participants to be able to write for this activity: it is possible to write, draw or do a collage.

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5. When having finished the journals, send the participants into groups: during a group discussion, participants share ideas about what helps them when they feel 'stressed'.
6. It is important that the facilitator makes sure that everyone can express themselves and participate in the discussion: these ideas can be playing sports, talking to someone, stretching, sleeping well etc.

In plenary:

7. To finish the activity, participants choose what helps them and they will draw or write a description in their diary.
8. Participants may present their journal to the group if they would like.



**Reflections:**

- What are some of the drivers of stress in your life?
- How do you deal with stressful situations?
- How can you support others who are in a stressful situation?



**Advice:** When facilitating this activity, it is important to focus on drawing as not all participants may be able to write. Not being able to write can be perceived as excluding, while writing is not necessary for participating in the activity.



**It may not be safe for migrants to bring along personal and self-made items when embarking on their further migratory journey. Along the route, migrants will be in different and changing legal positions and bringing a journal may potentially do harm in certain contexts.**



**Tips:** To make the journal even more useful for migrants, self-care strategies can be added to their journals for them to look at when they feel the need to.

You can improve this exercise by facilitating how participants can work with self-care and let them draw or write their own self-care plan.

Ask reflection questions such as:

- What are good coping mechanisms when you feel stressed?
- What will you do for the next week to cope with stress?
- The importance of sleeping well – taking a walk – exercising.
- It is important that the ideas come from the participants themselves and that you together explore, what is useful for them.
- Demonstrate how to do a breathing and grounding exercise at the end:
- Sit down, close your eyes, feel your feet, breath slowly in and out.

## IMPORTANT



### Self Care

Here, you can find a few tips for self care. It is important to adapt to the local context and situation, where some tips may be more advisable than others – especially when working with migrants and displaced persons, who may have experienced trauma.

- Focus on routine tasks.
- If you feel overwhelmed by the situation or your duties, try focusing on simple tasks and routines.
- Communicate with others.
- Let peers and supervisors know how you feel and be patient with yourself.
- Talk about your experiences and feelings (even those that seem frightening or strange) with a trusted person. Talking with someone about your thoughts and feelings may help you to process the event and come to terms with any unpleasant experiences.
- Talking with someone about your thoughts and feelings may help you to process the event and come to terms with any unpleasant experiences.
- Listen to how others describe the way in which the event has affected them and how they cope. They may share useful insights.
- Keep in touch with loved ones.
- Take care of your body and mind.
- Get enough rest and sleep. If you have difficulties sleeping or feel anxious, avoid caffeine, especially before bedtime.
- Consciously try to relax by doing things you enjoy, like meditation or yoga.
- Limit your intake of alcohol and tobacco
- Exercise to relieve tension, eat healthy foods, and keep regular meal times.
- Play and take time for fun.
- Express your feelings through creative activities, like drawing, painting, writing or music.

Caring for Volunteers, IFRC Reference Centre for Psychosocial Support, 2012  
[https://pscentre.org/wp-content/uploads/2018/02/volunteers\\_EN.pdf](https://pscentre.org/wp-content/uploads/2018/02/volunteers_EN.pdf)



## Shield of Protection



2-4 hours.  
One or more sessions



**Aim:** To support participant reflection on their own qualities and experiences. This strengthens self-awareness and stimulates positive thinking, positive attitude, and self-confidence.

The participants may take their shields with them to symbolically find protection along their journey.

### Key learning objectives:

(Re)gaining confidence

Enhance coping mechanisms

Stimulate self-care

Understanding, accepting, and managing emotions



**Target group:** participants from 12 years. Children with help from other adults or volunteers.



**Materials:** Paper sized approx. 297x420 mm • Coloured pencils/markers • Paint



**How to:** What do you need to prepare in advance?

1. Materials.
2. Awareness raising session on self-confidence: talents, dreams, and memories.

Background materials:

Read more about the topic of **protection** and **child protection**.

Process:

1. Give paper and coloured pencils/paint/markers to all participants.
2. Explain that in this activity the participants will be drawing a personal shield on the paper: everyone draws a big shield divided into 4 (or more) parts.
3. Ask the participants to individually, reflect upon 1 quality and/or talent, 1 dream, 1 nice memory and 1 thing that you like about now. Focus on only one element at a time and introduce each of them.
4. Ask participants to draw or paint in each one of the parts of the shield according to which element they are addressing: quality/talent, dream, memory.
5. Let the participants know that the main goal is to focus on the positive things in life and to remember our strengths.

In plenary:

6. Tell the participants that the memories and qualities noted on the shield can be perceived as protective elements when faced with challenging/difficult situations.
7. Participants can each present their shield to the group if they would like.



### Reflections:

- What was it like drawing or painting your own shield?
- In which situations do you think the shield could be useful to you?
- How can you use the shield to also protect others? E.g. your family?
- Why may it be important to have a “shield of protection” in life?

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**Advice:** As a facilitator, reflect upon how to adapt this exercise to be appropriate considering the context of the migrants you are doing it with.

Be careful about enforcing the positive aspects; participants should be allowed to draw what they consider being protection for them.

The exercise may help participants reflect upon times in their lives where they felt sure and safe. This can be helpful for thinking positive thoughts and aiming at regaining a sense of safety and security in their lives further on.



**Be careful not to insert a false sense of hope among the participants: we cannot ensure that safer times do lie ahead nor when things will be better for them. We can do safe referrals to help ensure migrants' access to other support systems throughout their journey.**



**Tips:** Participants can decide themselves how specific or abstract they would like each part of their shields to be, how detailed they want to draw and paint them, or whether they want to draw or write on their shields.

This exercise can be used for sensitisation in talking about deeper topics: what, and perhaps who, do the participants consider as “shields” in their life? What, and perhaps who, protects them in threatening situations?



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## Comic Book Writing and Story Telling



Full day.  
One or more sessions



**Aim:** For participants to practice telling their personal stories by honing creative and story-telling skills, and thereby stimulate writing, reading, and narration ability.

Participants may be able to bring comic books with them as a personal item. They can read for comfort throughout their journeys.

### Key learning objectives:

Develop positive communication skills including active listening, honesty, and respect

Stimulation of memory

Self-awareness

Develop a sense of empathy

Understanding, accepting, and managing emotions



**Target group:** Adult participants



**Materials:** Paper sized approx. 297x420 mm • Printed examples of comic drawing  
• Pencils (black and coloring)



**How to:** What do you need to prepare in advance?

1. Materials.
2. To facilitate conversations on emotions, communication, memory etc.
3. Read about basics of storytelling.
4. Basic drawing templates/examples: examples [www.skalvitegne.com](http://www.skalvitegne.com), [www.aresearchguide.com](http://www.aresearchguide.com) and [www.howtodrawcomics.net](http://www.howtodrawcomics.net).

Background materials:

Read more about the basics of **storytelling**.

Read more about conversations on **emotions, communication** and various tips for **good communication skills**, and stimulation of **memory**.

Process:

1. Introduce participants to drawing a person (head, position of eyes, ears, body etc.)  
Draw on a flipchart while making the example.
2. In a participatory way, discover together how to change the position of eyebrows and mouth to change the emotions. Ask participants to look at each other when expressing different emotions allowing for them to observe position of eyebrows, mouth, eyes etc. (if culturally applicable) . Draw on the flipchart while doing so – or you can ask one of the participants to make the drawing.
3. The instructions above can also be used to do the same activity for body language allowing participants to explore expressing different emotions, feelings etc.
4. Ask the participants to do a front page.
5. Provide examples of how to build up a story following the inspiration above.

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6. Tell participants that they can choose whether they want to purely draw/write or create real comics.
7. When participants have finished making their story/comic book, allow them to sit in small groups and take turns reading up as much as they would like from their story to each other.
8. Each group can decide if one of them wants to present their story in plenary to the group.

**Reflections:**

- What was it like making your own story/comic book?
- Which kind of story do you think was natural for you to write?
- Why did you decide to write exactly this story?
- Are there any similarities between the story and your own life/things you have experienced?
- What can different bodily expressions mean?
- Is body language interpreted the same everywhere?
- What may certain expressions mean in different contexts?



**Advice:** When facilitating this activity, it is important to focus on drawing as not all participants may be able to write. Not being able to write can be perceived as excluding. Writing is not necessary for participating in the activity.

This activity can stimulate memory and be good for practicing one's narrative. It is also an opportunity to practice storytelling and focus on fiction instead of narrating a true story. Participants should only do what they find comfortable.

**Stimulating one's memory may evoke strong emotions e.g., for migrants who have been exposed to trafficking, violence, and other harms. It is important to ensure safe referrals when there is trauma that needs to be addressed in a professional setting.**

**It may not be safe for migrants to bring along personal and self-made items when embarking on their further migratory journey. Along the route, migrants will be in different and changing legal positions and bringing a comic book with personal stories may do harm in certain contexts.**



**Tips:** If the participants are interested in exploring story telling further, you can engage with some of the following subjects within story telling:

- The importance of discussing how a story might change depending on the person who tells it.
- Explore together the different perspectives and classical developments of a story: teller, main character, protagonist, antagonist etc., as well as opening, point of no return, ending etc.
- Participants can choose to end the story or keep an open ending to their story, or even choose to rewrite or redraw the story.

## Sewing Masks, Baby Clothes and Other Useful Items



Full day.  
One or more sessions



**Aim:** To support participants unfolding their creative skills while contributing to the community by producing useful items such as masks, baby clothes, female pads, and other materials.

This activity can stimulate a sense of self-efficacy among participants and may also be an entry point for talking about psychosocial concerns, and for identifying the need for safe referrals to extended support and services.

### Key learning objectives:

(Re)gaining confidence

Enable cooperation and empower collaboration skills

Stimulation of self-reliance



**Target group:** Adult participants. Children with help from adults or volunteers.



**Materials:** Different kinds of textiles (e.g., leftover material) in different colors and patterns • Sewing kits (needles, threads, scissors etc.) • Examples and models of pieces sewn by others for inspiration • Prints from the internet to use as a guide and inspiration



**How to:** What do you need to prepare in advance?

1. Materials.
2. To facilitate conversations about health and community engagement in MHPSS.

Background materials:

Read more about **community-based health** and first aid and **MHPSS awareness raising**.

Process:

1. Show participants who do not know how to sew what to do, using easy methods with a needle and thread.
2. let the participants know that they can decide what they want to sew and that they can find inspiration from the pieces available sewn by others before them.
3. Support participants throughout the sewing session and participate as facilitator throughout the session, sewing your own item.



### Reflections:

- For which purpose may your items be useful?
- How can you best make use of the items in a proper and healthy way?



**Advice:** This activity can be done within the migrant community in order to stimulate collaboration and efficacy but also by engaging with the local host community, thereby stimulating social cohesion between migrant groups and their host communities.

**Some of the products that may be created during this creative session may cause harm to the general hygiene and basic health. If participants produce e.g., masks and menstrual pads, be sure to also provide information in appropriate use of these (e.g., in cases of no access to clean water and washing facilities).**

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**Tips:** If applicable and safe, ask people from the local community who are familiar with sewing to come and support the participants in learning how to sew. They can also take part in producing items for themselves, for the participants, and/or for the local community. This gives a sense of community because participants can talk to and engage with members of the local/host community. Moreover, it provides agency to both participants and members of the local community as they can make something worth for themselves and for the wider community.

The sessions can also be used as a platform for providing information, engaging in advocacy and awareness raising or for safe and dignified referrals inspired by the pocket guide for safe referrals. The sessions also have the benefit of being a platform for talking with both participants and members of the local/host community at once, a great opportunity to hear about their thoughts and concerns.



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## Jewellery Making



Full day.  
One or more sessions



**Aim:** To support participants in unfolding their creative skills. To enhance feelings of belonging to a community, self-efficacy, and productivity. Possible income-generating activity.

This activity may be an entry point for talking about psychosocial concerns and for doing safe referrals to extended support and services.

### Key learning objectives:

(Re)gaining confidence

Enable cooperation and empower collaboration skills

Stimulation of self-reliance



**Target group:** Adult participants. Children with help from adults or volunteers.



**Materials:** Beads • String • Clasps • Tools for cutting and fastening items (scissors, etc.)  
• Prints from the internet to use as a guide and inspiration



**How to:** What do you need to prepare in advance?

1. Materials.
2. Information, Education and Communications (IEC) material and safe referrals pocket guide.

Background materials:

Read more about **IEC** and **safe referrals**.

Process:

1. Explore together how to make jewellery with the available materials. There are different opportunities and kinds of jewellery, which can be made.
2. Explain to the participants that they can decide which kind of jewellery they want to make and that they can find inspiration from the pieces available done by others before them.
3. Support participants throughout the jewellery making session and participate as facilitator throughout the session, making your own jewellery piece.



### Reflections:

- What can your skills in jewellery making be useful for in the future?
- How does making your own jewellery make you feel?



**Advice:** If you have internet access, you may be able to find guidelines online on how to make different jewellery pieces. You may print these and put them on the table (with images showing how) so that participants can borrow those and look from them.

The session can also be used as a platform for providing information, engaging in advocacy and awareness raising or to do safe and dignified referrals, and benefit from talking to both participants and members of the local/host community at once.

This will be a chance to hear about their thoughts and concerns.

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**Be aware of doing this activity as a stand-alone activity: not all participants may be able to engage with more sessions of jewellery making and it should therefore inspire to find further support elsewhere. Always make sure to do safe and dignified referrals for professional support.**



**Tips:** If possible and safe, consider asking people from the local community who are familiar with jewellery making to come and support the participants in learning how to make jewellery. They can also take part in producing items for themselves, for the participants and/or for the local community. This promotes a sense of community as participants are able to talk and engage with members of the local/host community. Moreover, it provides agency to both participants and members of the local community as they can make something of their own but also to be distributed among their peers. Remember to also get jewellery materials for children to make something with of child-friendly easy-to-handle materials.



## Crafts with Iron Wire



Full day.  
One or more sessions



**Aim:** To support participants in unfolding their creative skills. Enhancing feelings of belonging to a community, self-efficacy and productivity. Possible income-generating activity.

This activity will also be a useful entry point to talking about psychosocial concerns and for doing safe referrals to extended support and services.

### Key learning objectives:

(Re)gaining confidence

Stimulation of self-reliance

Stimulate self-care



**Target group:** All age groups.



**Materials:** Iron wire • Tools for crafting with iron wire • Prints from the internet to use as a guide and inspiration



**How to:** What do you need to prepare in advance?

1. Materials.
2. Information, Education and Communications (IEC) material and safe referrals pocket guide.

Background materials:

Read more about **IEC** and **safe referrals**.

Process:

1. Explore together how to make different and interesting crafts with the available iron wire materials.
2. Explain to the participants that they can decide which kind of jewellery they want to make and that they can find inspiration from the pieces available done by others before them.
3. Support participants throughout the iron wire crafting session and participate as facilitator throughout the session, making your own iron wire art piece.



### Reflections:

- What was it like making your own iron wire piece of art?
- How do you think your skills gained from this creative process will be useful in the future?



**Advice:** If you have internet access, you may be able to find guidelines online on how to make different iron wire crafts. You may print these and put them on the table (with images showing how) so that participants can borrow those and look from them.

The session can also be used as a platform for providing information, engaging in advocacy and awareness raising or to do safe and dignified referrals. These sessions have the added benefit of talking to both participants and members of the local/host community at once, a chance to hear about their thoughts and concerns.

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Be aware of doing this activity as a stand-alone activity: not all participants may be able to engage with more sessions of iron wire crafting, and it should therefore inspire to find further support elsewhere. Always make sure to do safe and dignified referrals for professional support.



**Tips:** If culturally applicable, ask participants if they want to do a small preview of their iron wire crafts and invite members of the local community or they can decide to do a preview internally, showing each other what they have created and interviewing each other about the creative process.



## Painting Sessions



Full day.  
One or more sessions



**Aim:** To support the participants in unfolding their creative skills within painting and drawing. Moreover, painting and drawing may stimulate memory. It can be used as a form of communication and narration. Painting can also be used towards decorating the rooms where activities take place, or other areas such as child-friendly space.

This activity may be an entry point for talking about psychosocial concerns and for doing safe referrals to extended support and services.

### Key learning objectives:

Stimulation of self-reliance

(Re)gaining confidence

Develop positive communication skills including active listening, honesty, and respect



**Target group:** All age groups.



**Materials:** Paper, fabric, other materials to paint on • Could be any piece of cloth • Canvas board • Flipcharts • Large sheets of paper • Paint in different colours (different types of paint such as fabric paint, watercolours, acrylic paint, etc.)



**How to:** What do you need to prepare in advance?

1. Materials.
2. Information, Education and Communications (IEC) material and safe referrals pocket guide.

Background materials:

Read more about IEC and **safe referrals**.

Process:

1. Explore together how to make different art pieces/paintings.
2. Explain to the participants that they can decide which kind of jewellery they want to make and that they can find inspiration from the pieces done by others before them.
3. Support participants throughout the painting session and participate as facilitator throughout the session, making your own iron wire art piece.



**Reflections:** Does your painting/drawing tell a specific story/narrative?



**Advice:** The session can be used as a platform for providing information, engaging in advocacy and awareness raising or do safe and dignified referrals. The sessions also benefit from talking to both participants and members of the local/host community at once, making this a chance to hear about their thoughts and concerns.

**Be aware of doing this activity as a stand-alone activity as not all participants may be able to engage with more sessions of painting and drawing, and it should therefore inspire to find further support elsewhere. Always make sure to do safe and dignified referrals for professional support.**

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Tips: If culturally applicable, ask participants if they want to do a small preview of their paintings and drawings and invite members of the local community: or they can decide to do a preview internally, showing each other what they have created and interviewing each other about the creative process.

You can also ask participants to help decorate the walls, if you are e.g., doing activities in a community centre which needs decoration. The painting sessions can also be used for setting up a child-friendly space.

“ At the community centre, drawings made by the migrants line the walls. There are also posters on the Red Cross and Red Crescent principles, and details from the AMiRA project which provide contact information of the Movement migration focal points for services and support in neighbouring countries. Attendees of the community centre are introduced to the rules of the centre, and the ‘satisfaction box’ where they are asked to assess each day’s activities by placing a red or green card in the box prior to leaving the centre. ”

- Staff member from community centre in Niamey, Niger -

## Making Boardgames (Dam/Chess)



2-4 hours.  
One or more sessions



**Aim:** To engage in making items for entertainment together and enhance cooperation and positive communication skills within the migrant community.

The purpose is first and foremost to create the boardgames, but after that the activity can still go on, as participants can start to use and play their games together.

### Key learning objectives:

Stimulation of self-reliance

(Re)gaining confidence

Stimulate self-care

Develop positive communication skills including active listening, honesty, and respect



**Target group:** All age groups.



**Materials:** Pieces of cardboard • Markers in colors • Small pieces that can be used as counters (small stones, beads, or what may be available)



**How to:** What do you need to prepare in advance?

1. Materials.
2. Prepare the rules of the boardgames that you wish to inspire the participants to make and be able to facilitate playing of the games among participants at all age levels.

Background materials:

Read about how you can make your own boardgames and find inspiration for classical boardgames such as chess and dam (draughts).

Process:

1. Explain that in this session participants are invited to create their own boardgame, which they can later use for social activities, when needing a time to relax etc.
2. The activity can be conducted in groups making their boardgame together.
3. Use a flipchart/piece of paper/whiteboard or the like to initially draw up different examples of boardgames that the participants can make, e.g., chess and dam.
4. Explore together the appropriate proportions of the game pieces and how it should be made so the rules of the game can be followed.
5. Let participants make their personally selected boardgame on the cardboard: support them in drawing it up on the cardboard, following the right proportions etc.
6. When participants have finished creating their boardgame, allow them to play in groups as they like.



### Reflections:

- What was it like making boardgames?
- How did you manage to make the boardgame and play the game with someone who does not speak the same language as you?

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**Advice:** Make sure that you as a facilitator are familiar with the rules of the boardgame that the participants may be making (you provide them with some ideas), and that you can explain the rules to those who are not familiar with them. Or let the participants explain to each other in order to gain a sense of community and agency in working this out together.



**It may be difficult for the participants to bring the boardgames with them as they move on. Let them know that their boardgames can be used for community activities in the host community or in the child-friendly space or inspiration for other participants later on.**









**Tips:** Think of how you can make the games more child-friendly: and support the children learning how to play the game if they do not already know.



# SPORTS, RELAXATION, AND RECREATIONAL ACTIVITIES

Please read under *Types of activities* before starting any of the suggested activities.

<b>Drama</b>	 Full day. One or more sessions	
 <b>Aim:</b> To stimulate creative thinking and social interaction between participants through drama. Through drama, participants can explore different stories together and practice their storytelling skills as well as acting skills.		
<b>Key learning objectives:</b>		
Develop positive communication skills including active listening, honesty, and respect	Understanding, accepting, and managing emotions	
Build relationships and trust	Develop a sense of empathy	Enable cooperation and empower collaboration skills
 <b>Target group:</b> All age groups.		
 <b>Materials:</b> Available props participants feel like using in their theatre games.		
 <b>How to:</b> What do you need to prepare in advance? 1. Materials. 2. To inspire participants to engage in various drama activities.  Background materials: Read more about different kinds of <b>drama activities</b> and the effects of engaging in drama activities.  Process: The drama might be organized informally, without any direct guidance but depending on the group, the participants might need guidance.		
 <b>Reflections:</b> <ul style="list-style-type: none"><li>• How can roleplaying contribute to mental well-being?</li><li>• How does roleplaying stimulate memory?</li><li>• What is it like playing drama games with others?</li></ul>		

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**Advice:** The facilitators should observe participants and the public that may be present during the drama.



**Never force anyone to participate in a drama play if they do not feel like it. Make sure to agree upon a stop sign among all participants and that everyone understands it.**

**Participating in drama may evoke strong emotions among participants as they practice how to express themselves during this activity. Make sure that if certain sensitive topics comes up participants have access to and are referred to relevant support.**



**Tips:** Ask participants if they feel like inviting members of the local community to participate in the drama or if they want to show their drama play either to guests from the local community or each other within the migrant community.



## Football Match



Full day.  
One or more sessions



**Aim:** To inspire engagement in physical activities together and practice both football playing skills, as well as teamwork, cooperation, and coordination skills through playing football matches.

This activity can be an entry point for sessions on psychosocial support, either referral or linked to the football matches as an awareness session.

### Key learning objectives:

Develop positive communication skills including active listening, honesty, and respect

Build relationships and trust

Develop a sense of empathy

Enable cooperation and empower collaboration skills



**Target group:** All age groups. It may be a good idea to make the teams age-appropriate and compatible.



**Materials:** Ball • A field to play the match • Materials for making the two goals



**How to:** What do you need to prepare in advance?

1. Materials.
2. Land agreement
3. Prepare to talk about the basic rules of football with the participants in order to support them setting their own rules to play by.
4. Information, Education and Communications (IEC) material.
5. Knowledge on Safe Referral pathways via the Safe referral pocket guide.

Background materials:

Read into the basic **rules of football**.

Read more about **IEC** and **safe referrals**.

Process:

1. Invite participants for the football match
2. Organize the match either 1) as two teams playing, or 2) a small tournament with different teams.
3. Discuss the rules with the participants: as a facilitator, you should have the rules ready and ensure that everyone understands and agrees upon them.
4. You can look under “tips” to see variations of setting the rules of the football match.



### Reflections:

- How can football matches contribute to a positive sense of community?
- How do we make the teams of the football matches in the best way?

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**Advice:** Make sure that the match ends on good terms regardless of who wins/scores the most goals.



**Playing football matches may be a source of conflict for participants with different national backgrounds: the match may be seen as a competition, which can possibly evoke confrontations between participants rather than engaging a sense of community. As a facilitator, you should be aware of and pay attention to this and aspire to ending the match on good terms.**



**Tips:** Different variations of the game can be played according to how old participants are or how serious the game should be.

As an example, make different rules for the participants: for example, half of team 1 receives a paper saying they should try to pass the ball at least 10 times before scoring while the other half of the team receives a paper saying every player should touch the ball with their two feet before scoring. The teams are not allowed to talk about the rules.



## Creating a Child-Friendly Space (CFS)



Full day.  
One or more sessions



**Aim:** To provide children with a safe space for play and implementation of CFS activities to promote children's psychosocial well-being and safety. Activities have various aims. They support children in their recovery and management of stressful events. They also develop children's life skills, such as building relationships. They build their resilience and help children cope with their emotions. Very importantly, they also aim to keep children safe from harm.

### Key learning objectives:

Stimulation of self-reliance

Enable cooperation and empower collaboration skills

Build relationships and trust



**Target group:** Adults and volunteers to set up. Young children to participate in activities in the CFS.



### Materials:

- Equipment can be balls, nets, play parachutes, etc. that are needed to do an activity: increase or decrease the size and hardness of the ball to suit the children participating. For example, small and soft balls may be easier to catch for children with smaller hands.
- A soft ball or balloon can be used instead of a hard ball for children of different physical fitness or who can only use one arm because of injuries or impairments.
- Provide options for children to send or receive a ball in different ways; e.g., use a chute or gutter, or roll the ball on the floor.
- Use bells or rattle balls to assist children with visual impairments. Or use a piece of tape to wrap an ordinary ball in a plastic bag so that it makes a crackling sound when it is used.



**How to:** What do you need to prepare in advance?

1. Have all necessary materials ready such as paint, coloring pencils, balloons, stickers, and the like.
2. Space allocation/land agreement
3. Activity schedule with visuals and ages for various groups to know when they can access activities
4. Budget for activities and for training volunteers

Background materials:

Read more about the establishment of CFS and activities from the **catalogue for child-friendly spaces**.

Read more about **Humanitarian Service Points (HSP)** where you find a toolkit for inspiration e.g., on how to set up a child friendly space in a HSP.

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Process:

Skills children learn through play	Examples of children's learning
1. Show initiative to make a plan and follow it through	"First, I'm going to play the new shapes game with my friend, and then I am going to play in the sand box because it's a sunny day."
2. Apply concepts of quantity, science and movement to real life	"If I want to build a really tall building from blocks, first I will have to make a large base." "When I play house, I will need to get three dishes so that my mummy, daddy and baby sister can eat their food."
3. Reason in a logical, analytical manner by acting	"I am going to make a book about my family. The book will need five pages because there are five people in my family. I will colour one page each day, and then I can finish the book this week."
4. Communicate with peers and negotiate differences in points of view	One child goes quickly to the blocks and takes all of them. Two other children arrive and say that they want to also use the blocks. The three children decide to divide the blocks equally among the three of them.
5. Take satisfaction from achievements (a sense of pride)	"Today I found out that I could do things I've never done before, like making shapes with my body, acting my feelings, and using my imagination!" "I can see my artwork on the wall of the CFS. I'm really happy to be part of making our space beautiful."



#### Reflections:

- How does the Child Friendly Space contribute towards enhancing the children's mental wellbeing?
- Which activities can be done to increase the positive effects of the Child Friendly Space for the participants?



**Advice:** This can be achieved with the child-friendly suitcase which contains toys for kids to play with and which may spark creativity during emergencies and changing circumstances. This exercise may therefore be done without being as established in contexts where there is not enough time to decorate an entire room.

Besides tips for **activities to be implemented in CFS**, you can also find **general inspiration for activities with children**.

You can find inspiration for **trainings in working with child-friendly spaces**. This may be relevant especially since you may be recruiting volunteers from the local/host community who want to engage in supporting their peers.

**Consider what types of activities can be done here when people are only temporarily around e.g., in a Humanitarian Service Point (HSP) setting.**

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**Tips:** When this activity is conducted in dynamic settings/in settings that are moving according to the migratory route of e.g. migrant groups, it is relevant to bring the “suit-case” containing toys and other child-friendly products that can be easily arranged, used and set up in constantly changing contexts and for spaces where the children may not permanently settle.

If you facilitate activities for children who stay for longer periods of time within a particular community, you can monitor the effects of the child-friendly activities and involve children and their parents in improving the quality of activities implemented in the child-friendly spaces.

An activity which can be done with children, is the use of **child-friendly activity cards**.

If time allows and contact with children is possible over a longer period, you may decide to monitor the effects of the activity cards by involving the children in the **evaluation of the cards**.

Please consider the value of setting up a youth friendly space for young migrants, who could benefit from having a separate space for doing activities together.



# COMMUNITY ENGAGEMENT ACTIVITIES

Please read under *Types of activities* before starting any of the suggested activities.

## Examples of Activities for Migrants and Host Community Together



Full day.  
One or more sessions



**Aim:** To support participants to contribute in a productive way to host communities by gaining a sense of agency, efficacy, and usefulness, while at the same time using creative skills.

To support participants in gaining a sense of community with the host community where they are staying. It will create a sense of efficacy and usefulness by also providing them with a feeling of agency and creating ownership.

### Key learning objectives:

Develop positive communication skills including active listening, honesty, and respect

Stimulation of self-reliance

Build relationships and trust

Develop a sense of empathy

Enhance coping mechanisms



**Target group:** All age groups. Children participating with adults.



**Materials:** Materials for making soap\* • Moringa vegetables and tools for planting\*\*  
• Cleaning up kits and tools

\*For this purpose, it will be helpful to ask around either among the participants themselves or in the local community: does someone know how to make soap and which ingredients are needed? Various methods may be known and applied.

\*\*In order to plant Moringa vegetables, participants need to have access to the seeds and the tools required to do the planting. It will be helpful to reach out to members from the local community and ask if you can do it together. Various methods may be known and applied.



**How to:** What do you need to prepare in advance?

1. Materials.
2. Get in touch with relevant community actors, stakeholders, local members of the community, etc. .

Background materials:

Reach out to members of the local community who would like to participate in the activities. They can offer their knowledge on tools and methods needed and help examining which resources are available and which need to be procured.

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The knowledge and engagement of the participants as well as members of the local community is of great value when doing these activities, and their skills and experience make them more meaningful.

Process:

The suggested ideas for Community Engagement Activities are the following:

1. Soap making activity
2. Cleaning up activity
3. Planting moringa/vegetables

For these activities, there is no fixed process: activities can be done when and how participants want to engage with them. As a facilitator, it will be important to support the process, help with motivating the participants, and make sure to do follow-ups: how is it going with the activities?

It is important to also have some knowledge of how to make soap, of the vegetables you will be planting, and of how to organize cleaning up activities and the effects of them. This may also be something the participants know and you can ask them to explain to the group/have someone from the local host community visit and guide the participants in the process.

**Refer to the activity template on page xx for doing these activities.**



#### **Reflections:**

- What can the soap production be useful for?
- How can you make and maintain a vegetable garden?
- How can you make and coordinate schedules for who of the participants take care of the garden and when?
- What are the effects of doing cleaning up activities on your wellbeing? How can you inspire others to take part in cleaning up for the benefit of the community?



**Advice:** These are activities that require that the migrants/people on the move are closely in touch with the host community i.e. that they are not migrants stranded somewhere along the migratory route or migrants in a HSP somewhere in spaces far from villages or cities where community may be found, also in rural areas.

The activities can help strengthen social cohesion in contexts where migrants are staying for longer periods of time. It may also be used to strengthen social cohesion within migrant groups staying together either for shorter or longer periods of time.

**Campaigning for clean-up may be a sensitive topic in the host community and should not be initiated by the migrant groups/people on the move. Participants should only engage with the activity to the extent that they feel safe doing so.**

**Moreover, these activities may be difficult to conduct in settings where migrants do not feel safe, and/or where they are only staying temporarily. Also, migrants may fear the legal and political circumstances of their position and situation and therefore do not wish to engage further with the host community.**



**Tips:** Consider also inspiring participants to make a youth community garden for young migrants to maintain and work with themselves as a private youth friendly space for them to get to know and cooperate with each other.

# INSPIRATION FOR ACTIVITIES

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**Moving together book:** different organisations, specialists in their fields, have come together to share and learn from each other, and the result is this handbook. It is the strong hope of all four organisations that Moving Together will become a valuable tool for programmes combining sport and physical activities with psychosocial support.

**Life Skills handbook:** Life Skills features empowering skills that enable people to cope with life and its challenges and changes. Life skills support psychosocial well-being, by promoting good communication, positive thinking, analytical skills and goal setting, cooperation and coping.

**Sports activities for vulnerable children and youth:** The sports activities and exercises presented in the handbook are focused on strengthening the social and psychological mechanisms and coping skills among children and youth in their daily lives. The activities help young people and children build trust and develop their communication and teamwork skills



# IN DEPTH MHPSS KNOWLEDGE

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**Children's Resilience:** You can get in depth knowledge on various activities aiming at strengthening child resilience by consulting the children resilience programme. The aim of the training is to give participants an understanding of how to set-up, implement and manage the children's resilience programme and work with child protection.

**MHPSS for people separated from family:** This field guide presents psychosocial support resources for those working in the field with Restoring Family Links (RFL) and in accompanying relatives of missing persons. The guide gives resources for providing psychosocial support at each point of contact with separated families.

**MHPSS for people on the move:** This brief guidance note seeks to provide advice on protecting and supporting the mental health and psychosocial wellbeing of refugees, asylum-seekers and migrants in Europe. It describes key principles and appropriate interventions to guide all those who are designing and organizing emergency services and/or providing direct assistance to the affected people.

**MHPSS and outreach in local communities:** This handbook describes how psychosocial providers (PS providers) understand, assess and offer support in a disaster situation to promote psychosocial well-being, assist in creating safe environments and enhance protection. During an outreach walk, the PS providers access an area, identify signs of distress and needs for protection, and refer to services.

**Strengthening Resilience:** The aim of Strengthening Resilience is to illustrate the broad and diverse scope of psychosocial support. The book outlines fundamental activities in psychosocial support responses, including methods of providing psychosocial support, interventions in specific contexts and events, as well as programmes and activities for particular groups.

**Resilience programme for young men:** The Resilience Programme for Young Men focuses specifically on the needs of young men, featuring activities that support increased self-esteem, self-confidence, and self-perception, all vital to psychosocial wellbeing. It aims to strengthen social interaction, creativity and peer support.

**PSS for youth:** Psychosocial Support for Youth in Post-Conflict Situations handbook is a joint initiative of the IFRC PS centre and Danish Red Cross Youth. It uniquely combines a training programme in community-based psychosocial support for youth in post-conflict situations together with modules on facilitating training. The materials have been designed to develop staff and volunteers' skills.

**Safe referrals pocket guide:** The safe referral pocket guide is a step-by-step guidance on how to make safe referrals in practice and what to do when referral isn't possible. The pocket guide is for Red Cross and Red Crescent staff and volunteers, being in contact with people in need through their daily job.

IFRC Psychosocial Centre <https://pscentre.org/>