



FAITH-SENSITIVE MENTAL
HEALTH AND PSYCHOSOCIAL
SUPPORT (MHPSS) TO FOSTER

RESILIENCE IN CHILDREN ON THE MOVE





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This booklet is both a compilation and an expansion of the contributions and recommendations made during the three-part online series, *Fostering Resilience in Children on the Move*, held from September to November 2021. The recommendations and interventions from children on the move, faith leaders and faith actors, experts, and academic and civil society practitioners highlight the importance of faith-sensitive mental health and psychosocial support approaches as a crucial factor to foster the resilience and well-being of children on the move during the COVID-19 pandemic and beyond.

In building on the exchange of experiences, insights, and emerging practices, the booklet examines specific psychosocial support interventions that support, protect, and nurture migrant children's physical, socio-emotional, and spiritual well-being.

The three-part virtual series was a collaboration developed by Arigatou International, the KAICIID International Dialogue Centre, and World Vision International (WVI) as a collaboration of the International Partnership on Religion and Sustainable Development (PaRD) Sustaining Peace and Health workstreams. The organizations are active members of the PaRD, a network that brings together governments and international organizations with diverse civil-society organizations that work with faith communities to engage the social capital vested in faith communities for sustainable development and humanitarian assistance.

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GLOSSARY

CHILDREN

For the purposes of this publication, a child means every human being below the age of eighteen, as per the Convention of the Rights of the Child (CRC).

FAITH-SENSITIVE

"*Faith-sensitive*" is used to refer to services that are responsive to the faith of the affected individual and/or community, whether those services are offered by secular or faith-based providers (Queen Margaret University 2020).

FAITH-SENSITIVE MHPSS

This term refers to any mental health and psychosocial programming that is responsive to the faith of the affected individual and/or community regardless of whether the service providers are secular or faith-based (Queen Margaret University 2020).

TOXIC STRESS

The prolonged activation of the stress response system that can disrupt the development of brain architecture and other organs' system and increase the risk for stress-related diseases and cognitive impairment well into the adult years (Harvard Center of the Developing Child 2021).



WHAT IS THIS BOOKLET ABOUT?

This booklet is designed to raise awareness and provide recommendations about the need to include faith-sensitive approaches to support the psychosocial well-being of children on the move.

THE OBJECTIVES OF THE BOOKLET ARE TO:

RAISE AWARENESS about the effectiveness of faith-inspired psychosocial support frameworks to support the resilience and well-being of children on the move;

UNDERSTAND what the specific mental health and psychosocial challenges affecting children on the move are and how an integrated response—including MHPSS, spiritual nurture—might address some of those issues;

PRESENT EMERGING PRACTICES from local faith actors and young people that have proved effective to support the mental and emotional well-being of children on the move;

PRESENT CONCRETE RECOMMENDATIONS to raise awareness among governments in host countries, as well as humanitarian actors, to include faith-sensitive approaches on psychosocial, mental health, and resilience programs to support children on the move.

EXECUTIVE SUMMARY

In **2020**, an unprecedented

36 MILLION

children were on the move

SOURCE: [UNICEF](#)

“Children on the Move” is an umbrella term used to define children who are migrating or are moving due to various reasons that could include conflict, poverty, violence, natural disasters, climate change, discrimination, or lack of access to education or other services. They could be moving within or between countries and with or without their parents or other caregivers. Children affected by forced migration and displacement are one of the world’s most vulnerable populations that suffer from violations of their human rights and experience stressful, traumatic conditions that can have a severe impact on their psychosocial well-being.

The root causes of displacement and forced migration are multi-faceted, ranging from political persecution to a lack of economic prospects. Many people find themselves in dramatically deteriorating realities due to the combination of COVID-19, violent conflict, and climate change. Crisis prevention, post-conflict peacebuilding, and effective trauma responses are key elements in tackling the root causes of displacement and in building peace and resilience.

Religion, faith, and spiritual nurture can also contribute to support children’s resilience and act as a protective factor to positively

counter the effects of trauma responses during displacement¹. Faith-sensitive approaches also help children to feel connected, learn to build trust with adults around them, and develop a sense of purpose and meaning, even during challenging circumstances.

Typical mental health and psychosocial support (MHPSS) interventions do not incorporate children’s spiritual nurture as a pathway to resilience. Normally, MHPSS interventions are also not recognized as essential contributors to peacebuilding initiatives and social cohesion. Large gaps exist in the field of MHPSS regarding the understanding of how the spiritual nurture of children can contribute to resilience and about how MHPSS interventions should be integrated into peacebuilding approaches to enhance the overall well-being of children affected by forced migration and displacement as well as to contribute to building peaceful societies.

This booklet highlights how faith-sensitive MHPSS approaches play a crucial role in promoting the well-being of children on the move. Faith-sensitive MHPSS approaches can restore connections and relationships among children and adults, and enhance a child’s sense of belonging and resilience capacity.

THE BELOW SET OF RECOMMENDATIONS² CALLS UPON GOVERNMENTS IN HOST COUNTRIES AND HUMANITARIAN SECTOR INSTITUTIONS, AS WELL AS OTHER RELEVANT ACTORS AND STAKEHOLDERS SUPPORTING THE WELL-BEING OF CHILDREN ON THE MOVE TO:

- **adopt an MHPSS approach** as part of the overall strategy to foster peacebuilding and sustaining peace;
- **include early childhood interventions in faith-inspired MHPSS** in order to support families of young children, from birth to eight years of age, to provide nurturing care;
- **build the capacity of local faith actors** to deal with the drivers of conflict and refugee crisis, and effectively deliver faith-sensitive MHPSS programs;
- **engage local faith leaders to transform migration management practices** that are harmful to children on the move;
- **empower children to be agents of change** and facilitate and involve them in MHPSS interventions;
- **develop** new and adapt existing **monitoring and evaluation frameworks**;
- **create long-term multi-stakeholder partnerships** to support an integrated and holistic approach to faith-sensitive MHPSS with the goal of supporting children on the move and sustaining peace strategies.

¹ JOINT LEARNING INITIATIVE ON FAITH AND LOCAL COMMUNITIES. (2018). LEARNING BRIEF ON SPIRITUAL SUPPORT. [HTTPS://JLIFLC.COM/RESOURCES/LEARNING-BRIEF-SPIRITUAL-SUPPORT/](https://jliflc.com/resources/learning-brief-spiritual-support/)

INTRODUCTION

"We have to keep in mind that children on the move are first and foremost children and their rights move with them!"

Dr Najat Maalla M'jid, SRSG VAC

"Mental health and psychosocial support (MHPSS) interventions provide children with spaces of 'relative safety' and moments of joy and relief, where children can learn and socialize, where children on the move can just 'be children'".

Ms Rania Al Ayoubi, Founder Image for Education, Jordan

Children affected by forced migration and displacement repeatedly experience stressful and traumatic conditions that have a severe impact on their psychosocial well-being. They are exposed to a heightened risk of violence, gender-based violence, child trafficking, lack of access to education, and other adverse childhood experiences that can take a heavy toll on their psychosocial well-being.

The UN Convention on the Rights of the Child remains the main international instrument to address the rights of children including children involved in migration. The Committee on the Rights of the Child stresses that "States should ensure that the rights enshrined in the Convention are guaranteed for all children under a State's jurisdiction, regardless of their own or their parents' migration status, and address all violations of those rights"³.

Despite being obliged under the UN Convention on the Rights of the Child to respect, protect and fulfill the rights of all children - irrespective of their status or place of origin - many governments still perceive children on the move as threats or offenders against migration laws, leaving them without adequate protection and often subject to prosecution, detention or unsafe return⁴.

The COVID-19 pandemic has further exacerbated the multiple and multi-layered challenges faced by children on the move. UNICEF highlighted that migrant and displaced children who are at heightened risk to the immediate and secondary impacts of COVID-19 have been affected disproportionately by the pandemic⁵.

Children' psychosocial well-being is the foundation for building trust and positive relationships, and for social cohesion and peace.

Adverse environments can negatively impact individual psychosocial well-being and increase propensity for violence, thus contributing to a higher level of conflict in society, including violent conflict. Therefore, an adverse environment negatively affects both an individual's mental well-being and the broader societal conditions that can lead to greater tension and conflict. In particular, humanitarian actors acknowledge the toll violence takes on mental health and the ultimate damage it does to social cohesion.

Several humanitarian actors have developed interventions to mitigate these effects and have adopted policies to integrate MHPSS in emergency settings. Examples include strengthening community self-help and social support, deploying psychological first aid,

psychological interventions, and establishing links and referral mechanisms between mental health specialists, general health-care providers, community-based support, and other services.

Psychosocial support interventions need to become an integral part of peacebuilding because they support individuals and communities affected by adverse environments, as a means to help them cope and restore positive relationships, as well as act as a preventive mechanism against the recurrence of violence.

Effective MHPSS interventions need to be sensitive to the values, cultures, and contextual needs of the population. Often this means MHPSS needs to be informed or inspired by faith, as children often carry with them religious and spiritual beliefs and traditions from their families and communities of origin. These beliefs and traditions are part of children's identity and can contribute to their sense of purpose, belonging, and, ultimately, their resilience.

3 COMMITTEE ON THE RIGHTS OF THE CHILD. REPORT OF THE 2012 DAY OF GENERAL DISCUSSION. THE RIGHTS OF ALL CHILDREN IN THE CONTEXT OF INTERNATIONAL MIGRATION (2012). [HTTPS://WWW.OHCHR.ORG/DOCUMENTS/HRBODIES/CRC/DISCUSSIONS/2012/DGD2012REPORTANDRECOMMENDATIONS.PDF](https://www.ohchr.org/documents/hrbodies/crc/discussions/2012/dgd2012reportandrecommendations.pdf)

4 INTER-AGENCY GROUP ON CHILDREN ON THE MOVE. THE UN HIGH LEVEL DIALOGUE ON MIGRATION AND DEVELOPMENT 2013: WHY CHILDREN MATTER. BACKGROUND PAPER, APRIL 2013.

5 UNICEF [HTTPS://WWW.UNICEF.ORG/DOCUMENTS/SOCIAL-PROTECTION-CHILDREN-AND-FAMILIES-CONTEXT-MIGRATION-AND-DISPLACEMENT-DURING-COVID](https://www.unicef.org/documents/social-protection-children-and-families-context-migration-and-displacement-during-covid)

There is considerable evidence pointing to the connection between spiritual nurture and children’s resilience acting as a protective factor positively affecting trauma responses during displacement. For example, in the Latin American context, a research study of Central American migrants in a transit shelter in Mexico concluded that the most important factors that helped them build up their resilience were: trustful relations; support from religious organizations including shelters; hope for the future; value systems and beliefs; creativity and persistence; problem-solving; and self-awareness⁶. However, more research is needed on the profound relationship between spirituality and resilience among displaced children. Enquiring into this particular area is urgent not only because of the increasing number of displaced children in the world today but also because of the insufficiency of current responses, which fail to address children’s deep questions about life, themselves, the world, and God or the Transcendence. Addressing these deep existential needs constitutes a key resilience factor for migrant children⁷.

Aware that although there are only a few MHPSS interventions that have included faith-sensitive approaches and that more research is needed in this field, this booklet presents a small contribution towards the inclusion of faith-sensitive MHPSS responses. The concrete recommendations and resources that follow are directed to all actors working to promote the mental well-being of children on the move. The booklet also includes advocacy recommendations and promotes solutions to make these interventions more central to the peacebuilding agenda.

THE NUMBERS⁸

According to UNICEF, in 2020,

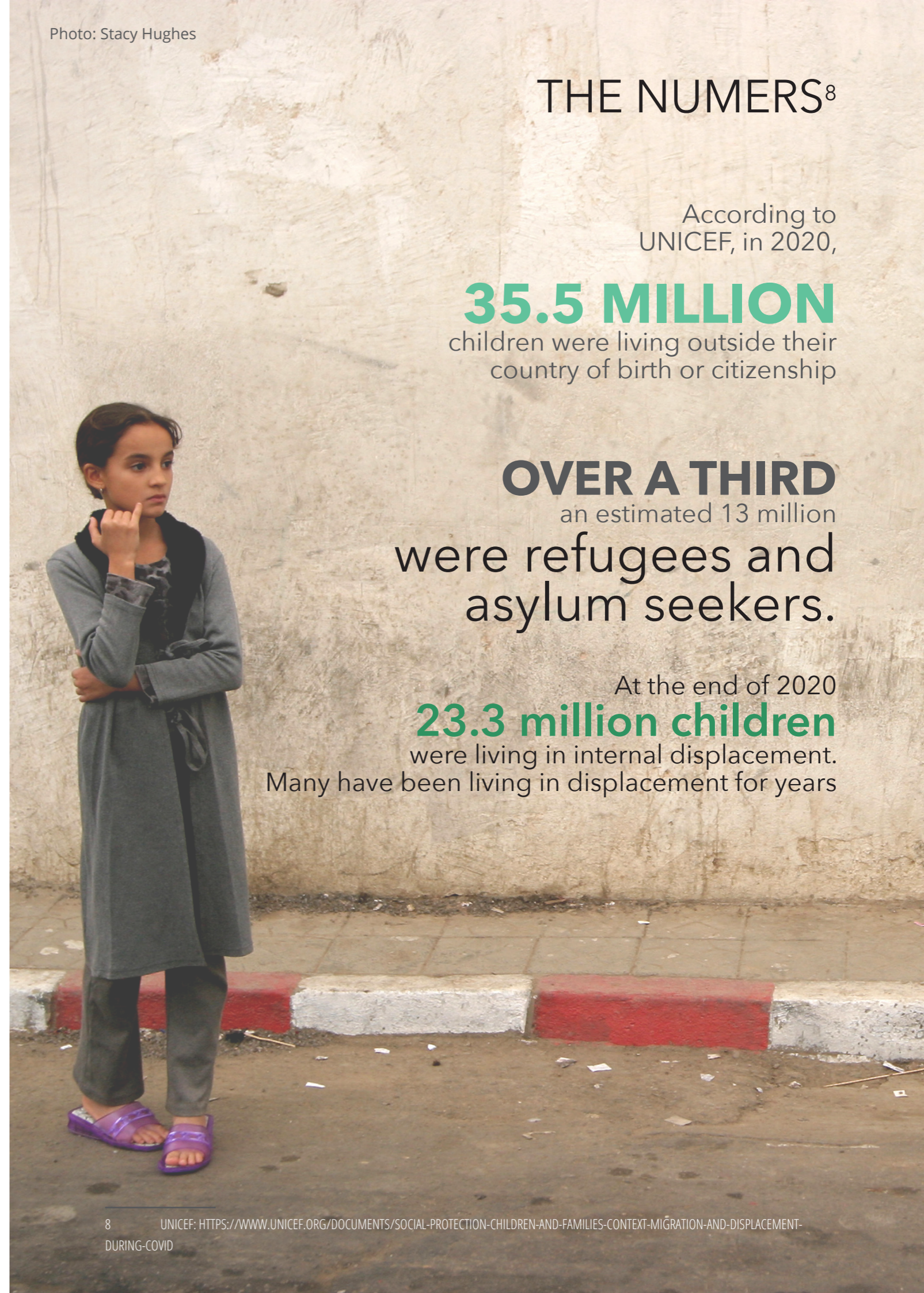
35.5 MILLION children were living outside their country of birth or citizenship

OVER A THIRD an estimated 13 million were refugees and asylum seekers.

At the end of 2020 **23.3 million children** were living in internal displacement. Many have been living in displacement for years

6 BARRAL, A. LA RESILIENCIA DE LOS MIGRANTES CENTROAMERICANOS DURANTE SU RECORRIDO EN MÉXICO Y EN TRÁNSITO HACIA LOS ESTADOS UNIDOS DE AMÉRICA. MASTER DISSERTATION. UNIVERSIDAD INTERCONTINENTAL, ESPECIALIDAD EN ATENCIÓN PSICOLÓGICA A MIGRANTES. (2009).

7 ANDRADE VINUEZA, M, A. THE ROLE OF SPIRITUALITY IN BUILDING THE RESILIENCE OF MIGRANT CHILDREN IN CENTRAL AMERICA: BRIDGING THE GAP BETWEEN NEEDS AND RESPONSES. INTERNATIONAL JOURNAL OF CHILDREN'S SPIRITUALITY, 22(1), 84–101 (2017).





WHAT ARE THE MENTAL HEALTH CHALLENGES FOR CHILDREN ON THE MOVE?

IN THIS CHAPTER:

WHAT DO CHILDREN NEED FOR DEVELOPMENT?
SITUATION OF CHILDREN ON THE MOVE

WHAT DO CHILDREN NEED FOR DEVELOPMENT?

"I would like to be like any kid who has a teacher and a school. I like to study and I would like to be a teacher one day. Now I do not study because there is no school next to our camp."

Maream, displaced girl-child from Syria

We know what children need to reach their full potential. The Nurturing Care Framework for Early Childhood Development⁹ highlights key interrelated and indivisible components that promote child development, specifically, good health, adequate nutrition, security, safety, responsive caregiving, and learning opportunities. For children on the move, some or all of these elements are lacking. In particular, as children often migrate without their caregivers, they are denied responsive caregiving. Responsive caregiving is about listening to children and being open to recognizing their needs. It is also about being able to provide adequate safety and stimuli

and build positive interactions and attachment with children. When children lack responsive caregiving, it limits their capacity to build trust and social relationships, as they cannot develop an attachment to or emotional bonds with caring adults around them and experience enjoyable interactions that help children to understand the world around them and to learn about people, relationships, and language. Spiritual support intersects with several of these key aspects of development but, in particular, with the provision of a safe and secure environment, with responsive and loving caregiving, and learning opportunities and stimuli.

⁹ A FRAMEWORK FOR HELPING CHILDREN SURVIVE AND THRIVE TO TRANSFORM HEALTH AND HUMAN POTENTIAL. THE FRAMEWORK WAS DEVELOPED BY WHO, UNICEF, AND THE WORLD BANK GROUP, IN COLLABORATION WITH THE PARTNERSHIP FOR MATERNAL, NEWBORN & CHILD HEALTH THE EARLY CHILDHOOD DEVELOPMENT ACTION NETWORK AND MANY OTHER PARTNERS.

COMPONENTS OF NURTURING CARE



Source: World Health Organization, United Nations Children's Fund, World Bank Group. Geneva: World Health Organization; 2018



SITUATION OF CHILDREN ON THE MOVE

Children on the move face a large and complex reality and, to ensure adequate and sensitive support, we must understand the background, context, and root causes of migration for each child.

Some children are forcefully displaced while some have a migration plan. They may witness or experience violence, torture, and the loss of close family members and friends. Understanding the reason for their migration is the first step toward providing a safe environment for the child.


Along their entire migration route, children on the move can be the target of violence, witness it, or be otherwise exposed to violent or traumatic events.

Displacement also brings further stressors. Children experience the loss of the familiar: home, language, belongings, cultural milieu, social networks, and social status. Additionally, children on the move face an uncertain future that could include resettlement in places where they continue to be exposed to community violence, economic deprivation, deportation, or detention.

This causes concern for children's safeguarding as well as for their long-term development. Mental health challenges such as toxic stress and adversity, particularly in the early years, can impair children's neurological development and affect their full development¹⁰.

10

UN SPECIAL REPRESENTATIVE OF THE SECRETARY-GENERAL ON VIOLENCE AGAINST CHILDREN. VIOLENCE PREVENTION MUST START IN EARLY CHILDHOOD (2018).



These are some of the mental health issues affecting children on the move:

- Depression and anxiety due to camp conditions
- Traumatic reactions (nightmares, etc.)
- Isolation
- Adaptation disorder
- Speech problems (and other somatic responses)
- Suicide attempts, self-harming behavior
- Drug and alcohol abuse

MENTAL HEALTH AND PSYCHOSOCIAL CHALLENGES

Challenges faced by children can be determined by a number of factors. For example, boys often stay in sections with single men in refugee camps, developing attachment to “role models” and imitating the men’s behavioral patterns. In some cases, this behavior includes drug and alcohol abuse, aggression and/or harassment. Specialized institutions or shelters focused on minors who are addicted to drugs do not necessarily exist. This fact means these vulnerable children do not receive adequate services.

Hyperactivity and aggressiveness were identified mostly in children of younger ages, while depression, anxiety, and self-harm are the types of behaviors most often identified in teenage minors¹¹.

It is important to note that anxiety is often related to existing or perceived family pressures that children migrating alone are facing.

This is because in some cases, unaccompanied children are sent ahead of their families as “anchors” to enable family reunification in the future.

Although the child is underage, from a socio-cultural perspective the child actually has adult-like responsibilities and there are many expectations in terms of his role and how the child could support the wellbeing of the whole family.

Understanding these dynamics plays an important role to support and respond to children's mental health and development¹².

¹¹ INTERNATIONAL ORGANIZATION FOR MIGRATION. MANUAL ON COMMUNITY-BASED MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN EMERGENCIES AND DISPLACEMENT (2021).

¹² INTERNATIONAL ORGANIZATION FOR MIGRATION. GLOBAL MIGRATION DATA ANALYSIS CENTRE (GMDAC). CHILD MIGRANTS: HOW LITTLE WE KNOW (2017).



MIGRATION MANAGEMENT PRACTICES AND THE MENTAL HEALTH OF CHILDREN ON THE MOVE

Migration management practices can threaten the mental health of children. These practices are designed to protect children but they can often exacerbate the stressors that contribute to the isolation, depression, and anxiety that affect children on the move.

Separating children from their parents in the context of detention threatens their attachment bond, adding to their fear and lack of safety. Detention and detention-like situations have a strong correlation with worsened mental conditions¹³.

Likewise, there is a correlation between family separation or community separation to reinforce protection mechanisms and diminishing mental health status. Even if children are accompanied by their families, they often have migrated with members of their community to whom they have developed attachments during the journey.

Separation contributes to their isolation and alienation as children are separated from their primary caregivers as well as from the entire community they left behind.

Asylum-seeking and refugee children living in communities in countries of destination are also exposed to additional stressors. Research has pointed to the secondary trauma children experience in this period, including asylum determination procedures that are not child-sensitive.

¹³ VON WERTHERN, M., ROBJANT, K., CHUI, Z. ET AL. THE IMPACT OF IMMIGRATION DETENTION ON MENTAL HEALTH: A SYSTEMATIC REVIEW. BMC PSYCHIATRY, 18, 382 (2018).



HOW CAN FAITH-SENSITIVE MHPSS FOSTER THE RESILIENCE OF CHILDREN ON THE MOVE?

IN THIS CHAPTER:

WHAT IS FAITH-SENSITIVE MHPSS?

WHERE DO FAITH-SENSITIVE MHPSS APPROACHES
COME INTO PLAY?

INSPIRING STORIES

"The opportunities and support offered by faith communities in my host countries India and Pakistan are one of the factors that helped me grow and achieve my goals in terms of education and allowed me to also contribute actively to the society."

Hayat, Refugee from Afghanistan

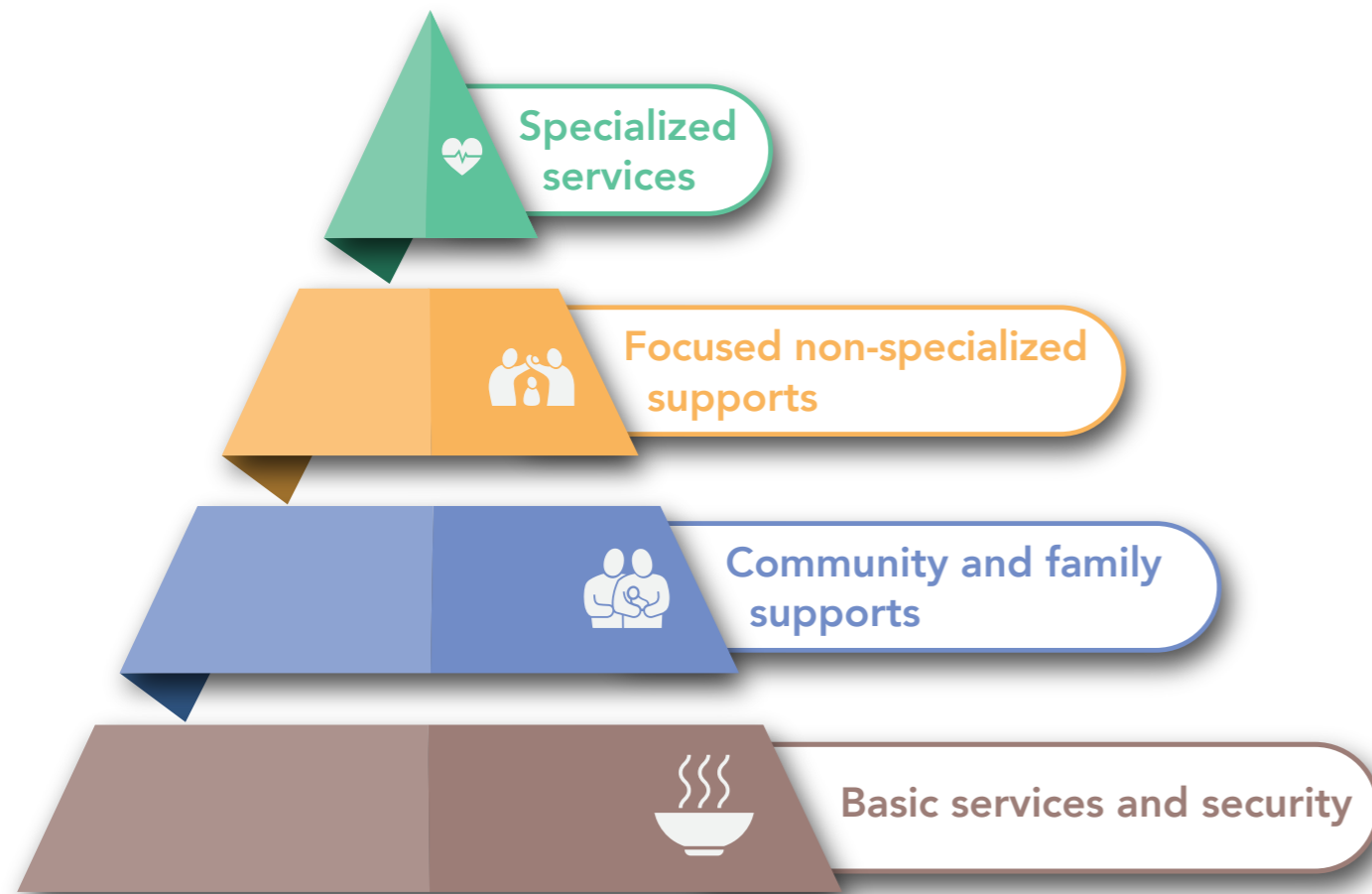
WHAT IS FAITH-SENSITIVE MHPSS?

MHPSS interventions refer to a wide range of interventions that focus on mental, emotional, and psychosocial well-being. These activities range from community-based activities such as dialogue, play, and sports for children to the more specialized interventions carried out by professional psychologists or psychiatrists. Specialized interventions represent only a fraction of the total interventions. The non-specialized or non-medicalized interventions include practical group activities to build trust and positive relations and foster confidence and a sense of belonging, as well as activities that target social cohesion. These may include community dialogues, child-friendly conversations, reconciliation projects, story-telling, peace education activities, and counselling. Many of these activities can be carried out by children themselves in a peer-to-peer format, whereby older children help the younger ones to cope and build relationships with others. Children usually feel relieved

if they can express and communicate their distress in creative ways using play, sports, art, or prayers, when appropriate, to express their feelings. These activities can be a boost for their confidence and can support them to learn to deal with conflicts in a child-friendly manner.

The figure on the next page is from the Inter-Agency Standing Committee (IASC)—which coordinates humanitarian actors inside and outside of the UN as MHPSS technical working groups in 53 countries. The Inter-Agency Standing Committee (ISAC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings (Geneva ISAC, 2007) highlighted four different types of MHPSS interventions ranging from basic services, community and family support, focused non-specialized support, and specialized support, providing a clear overview of the range of activities included under the umbrella of MHPSS.

INTERVENTION PYRAMID FOR MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN EMERGENCIES



Source: Own elaboration from Inter-Agency Standing Committee (IASC), Guidelines on Mental Health and Psychosocial Support in Emergency Settings (Geneva IASC, 2007)

WHERE DO FAITH-SENSITIVE MHPSS APPROACHES COME INTO PLAY?

Integrating faith-sensitive MHPSS approaches starts with recognizing that religious practices—such as gathering, rituals, and praying—can be an element of psychosocial support that should be complemented rather than replaced by other forms of MHPSS. Children on the move come with their own spirituality and faith traditions: faith sensitivity is about respecting those identities and leveraging them to build resilience and a sense of purpose and belonging.

It is evident that faith, religion, and spirituality can improve how people cope with distress. Spirituality can provide a sense of structure and belonging and offer connection to a community. Children on the move come with their own culture and context, and faith is very often a crucial part of who they are. Designing psychosocial approaches in a faith-sensitive way acknowledges and strengthens their identity, sense of belonging, and existing relationships. Religion and spirituality have the potential to create communities in which children can express themselves without being judged, excluded, or given

up on, and instead regain their confidence. Religious rituals and celebrations can also be a channel to relieve negative emotions and build relationships, including with the host community.

In many cases, local faith communities are the first responders providing key services for children including their education. Religious and spiritual leaders can have a positive influence in helping people cope and in promoting peaceful coexistence and participation.



The Faith-Sensitive Approach in Humanitarian Response: Guidance on Mental Health and Psychosocial Programming provides some concrete recommendations on how best to integrate faith in MHPSS programming.

Essentially, when it comes to faith-sensitive MHPSS approaches, three types of programs can be distinguished here:

- MHPSS programs with some faith elements
- programs giving weight to both MHPSS and faith
- faith-based programs with some elements of MHPSS

These integrated programs that include MHPSS and spiritual nurture have proven effective in helping children on the move to cope and foster their resilience. Faith-sensitive MHPSS interventions are important for supporting children, individuals, and communities affected by adverse environments and for reducing the risk of violence. From the experiences shared during the online sessions, it was found that very often faith leaders are open to learning about

MHPSS approaches and how they can integrate them into their community, fostering a community-based movement. Faith communities, when focusing on the spiritual nurturing of children, can be equipped to support the deep inner needs of children on the move in terms of questions about life, themselves, the world around them, and their relationships with others, God or the Transcendent, but also in terms of hope for the future, self-awareness, and self-confidence.

Currently, faith-sensitive MHPSS approaches are not systematized and are often carried out ad hoc. Many faith-based organizations or religious communities are unaware that their work contributes to support the MHPSS of children on the move; and very often secular organizations and governments that carry out MHPSS interventions do not have the knowledge of how to integrate faith-sensitive approaches or to incorporate the more transcendental aspects of religion and spirituality that are important for children on the move.

The stories on the following pages, shared during the online discussions, present concrete examples of faith-sensitive MHPSS approaches.

STORY FROM: DEMOCRATIC REPUBLIC OF CONGO (DRC):

Equipping faith communities with MHPSS

The city of Beni, DRC, faced an Ebola outbreak and a prolonged violent conflict that dramatically affected the well-being of the local community. The local Muslim and Christian faith communities wanted to support the mental and psychosocial well-being of the affected children, but they lacked the skills and knowledge to support MHPSS interventions. The Petra Institute in South Africa, a Christian organization supporting the well-being of children, organized a series of training sessions for religious leaders, supported by the following principles:

- *connectedness*
- *common values and*
- *designing a methodology for cascading and passing on the knowledge*

The religious/faith leaders were trained with the basic skills to organize MHPSS activities with children. The training enabled religious/faith leaders to build deep relationships with children, valued intergenerational relationships and dialogue activities, promoted active relationship building with people from other faith traditions, and developed a culture of acceptance and belonging. These positive relationships and interactions helped the children to feel more connected and motivated to return to school, and develop trust in the adults around them.



STORY FROM:
VENEZUELA

Hope without Borders Network

The Hope without Borders Network is an Alliance of 1000 churches in Venezuela that also works with countries like Brazil, Colombia, and Peru, where Venezuelan refugees are moving.

In many communities hosting Venezuelan refugees, state services have been disrupted and church communities are filling the gaps to provide essential services to children on the move. Their efforts also contribute to prevent children on the move from being recruited to join gangs.

The Network works with children on the move and children left behind in their home countries by parents who migrated. The Hope without Borders Network sustains and strengthens the capacity of faith actors to support children on the move. The children are encouraged to connect through:

- religious services in their mother language
- activities to provide emotional support
- access to education

The children build confidence because the Church network provides them with a safe environment, knowledge about child rights, and hope and a vision for their future.

Hope without Borders Network also works to sensitize the receiving community, reducing the stigma against the children on the move.



STORY FROM:
INDIA

Young people supporting Rohingya refugees

Youth for Peace International is a youth-led organization that supports refugee children with education and addressing their psychological health through the motivation of play, dance, and art therapies. Youth for Peace International trains local facilitators to work with Rohingya in the camps in New Delhi.

Young volunteers began to complement the provision of basic education services with MHPSS interventions, particularly targeting children's hyperactive and aggressive behavior. The program also focuses on building trust between children and adults in the refugee camps, helping parents and caregivers understand the role of children and advocating for positive parenting. Youth for Peace International partnered with local faith leaders, who are closely connected to the community, speak the language, and are trusted by parents and caregivers to reach families.

The partnership between young people and religious leaders has been very effective to open conversations about the mental health and well-being of children and to promote positive practices that parents can use to help children cope while on the move.

RECOMMENDATIONS

Faith-sensitive MHPSS approaches are crucial to the well-being of children on the move, to restore connections and relationships among children and adults, and to enhance children's sense of belonging and capacity for resilience.

Faith-sensitive MHPSS approaches contribute to children's social, emotional, and spiritual development and mental health and psychosocial well-being.

The virtual series of discussions on faith-sensitive MHPSS have identified existing gaps and limitations in the implementation of faith-sensitive MHPSS approaches that need to be addressed to better contribute to children's resilience and ultimately to peacebuilding.

The below set of recommendations calls upon governments in host countries, humanitarian sector institutions, faith actors working with children on the move, and other relevant institutions to take part in the following actions:

- **adopt an MHPSS approach as part of the overall strategy to foster peacebuilding and sustaining peace.** This includes building on and involving faith-sensitive interventions that are holistic and includes parents, teachers, and faith leaders while increasing the necessary funding to prioritize faith-sensitive MHPSS;
- **build the capacity of local faith actors to deal with the drivers of conflict and refugee crisis, and effectively deliver faith-sensitive MHPSS programs.** This can be done by providing local faith actors with guidance and tools to engage in safe and appropriate faith- and evidence-based

MHPSS approaches. This will strengthen the knowledge and build on the experiences that faith communities have dealing with trauma, the consequences of exposure to violence, and means of healing, as well as learn to integrate those into their faith-inspired responses;

- **engage local faith leaders to transform migration management practices that are harmful to children on the move.** Faith leaders and communities are often the first responders and main service providers for children on the move. They can, therefore, advocate for the protection of the rights of migrant children, and influence national and local decisions on migration management rules that can have important effects on the mental health of migrant children. They can play a critical role by being vocal in challenging the image and narrative of the other that often justify decisions about migration, they can challenge negative stereotypes and prejudices about migrants and refugees in their religious practices and services, and they can collaborate with other faith communities to develop joint awareness-raising campaigns;
- **include early childhood interventions in faith-inspired MHPSS to support families of young children,** from birth to eight years of age, to provide nurturing care. Recent findings in neuroscience confirm how negative and adverse experiences in the early years affect the development of the child. For this reason, it is crucial that MHPSS interventions also target the youngest children, equipping parents in responsive caregiving and positive parenting approaches;



- **empower children to be agents of change and facilitate and involve them in MHPSS interventions.** This can be done by creating safe spaces to listen to children's needs and voices where they participate and feel empowered to propose solutions. Evidence already exist on the role that children and young people can play as actors promoting transformation in their communities, through good practices of peer-to-peer mental health and psychosocial support, as well as peace education programs that prioritize social and emotional well-being. MHPSS strategies should support the creation of spaces where groups for children on the move can connect and socialize, including with the hosting communities, thus helping them build positive relationships while strengthening their self-concept, self-esteem, and resilience capacity;
- **develop new and adapt existing monitoring and evaluation frameworks.** Many of the faith-sensitive interventions in place are implemented ad hoc and do not rely on

a set of indicators that support evidence gathering and show progress. For faith-sensitive approaches to be further included in interventions supporting children on the move, it is important to develop monitoring and evaluation frameworks to track effectiveness and progress. This will allow to identify what works and scale up faith-sensitive evidence-based strategies;

- **create long-term multi-stakeholder partnerships to support an integrated and holistic approach to faith-sensitive MHPSS** with the goal of supporting children on the move and sustaining peace strategies. This includes building bridges between grassroots faith leaders, health, child protection and education institutions, as well as regional and international actors to develop collaborative approaches, share expertise, and strengthen the work for sustainable peace.

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