

# FOCUS Living Well Together Forum #2 Mental health and psychosocial support in dynamic integration

21 June 2021

Discussion with Guglielmo Schininà | Alison Strang
Facilitated and introduced by Dean Ajduković | Anouk Boschma | Martha Bird



Guglielmo Schininà
Head of Mental
Health, Psychosocial
Response and
Intercultural
Communication,
IOM



Alison Strang
Senior Research
Fellow, Institute for
Global Health and
Development
Queen Margaret
University Edinburgh



Dean Ajduković
Full Professor of
Social Psychology
Department of
Psychology,
University of Zagreb



**Anouk Boschma** 



Martha Bird

Advisors, IFRC Reference Centre for Psychosocial Support / FOCUS coordination

The FOCUS Living Well Together Forum #2 'Mental health and psychosocial support in dynamic integration' took place on 21 June 2021. Renowned experts Alison Strang, Guglielmo Schininà and Dean Ajduković discussed why we should not make trauma and vulnerability a passport for integration, how personal interaction erodes stereotypes, and what difference political narratives can make.

## **Guglielmo Schininà on Vulnerability**

**Dean Ajduković:** Guglielmo, you have formerly referred to a framework of vulnerability in the migration and integration discourse and how it is not supportive of migrants, including refugees, their needs and rights, or their psychosocial well-being and mental health. Can you explain why that is?

Guglielmo Schininà: Yes, I have been critical on the framework that wants all migrants to be vulnerable and then turns the vulnerability of migrants, on the one hand, into the only reason to be administratively admitted in a country, and on the other into fuel for anti-migrant discourses. We tend to be exclusive towards migrants because we think they bring vulnerabilities to us, to our culture,





our society, our system. On the other hand, we are accepting only those migrants who demonstrate exceptional vulnerability coming from their past or from their journey. Both these discourses – the sovereign one saying: 'These people make our culture, our concept of nation, our state vulnerable'; and the one saying 'No, we need to have them all with us, we need to integrate them because they are so vulnerable' – **both are, to me, discourses that don't help the integration of migrants.** 

This hasn't always been the case. It is interesting to see how, in the industrial era in Europe, migrants were considered healthier than the general population – also from a mental health perspective – because they were associated with young people (usually young males) who migrated because of an upward social mobility objective; or because they had strong beliefs, which forced them to leave their country.<sup>1</sup>

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Guglielmo Schininà

This was the perception until the end of the industrial era. The change in perception started with the fall of the Berlin Wall, when the possibility to control movements became much more limited for most European countries. This brought forth a narrative of vulnerability, illness and risk, not at all supported by epidemiological data but linked to the perceived loss of control over movements. From the 1980s on, this discourse on the 'unhealthy' migrants, migrants that were sick and likely to bring diseases, was associated with the concept of trauma: the 'unhealthy' migrants became 'traumatised' migrants.

Migrants' vulnerability is often a result of poor migration management, with legal pathways for arrival and integration frequently not working. Some migrants therefore travel irregularly. Irregular migration is criminalised

in many cases which creates of spaces of vulnerability: detention centres, identification centres, informal camps like in Calais. These are spaces created for the assumed or alleged protection of migrants and the security of the host communities, but they turn into the opposite: spaces requiring, adding and creating vulnerability.

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Guglielmo Schininà

According to Foucault, the first step to objectifying people is creating thresholds and tests: spaces where people have to demonstrate something in order to be included. In the case of migrants, what they have to demonstrate is vulnerability: if one is exceptionally vulnerable, a refugee, **if one can demonstrate a history of suffering, has a terrible illness, they are allowed to stay**. If not, in principle, they need to go. Yet, the fact that migration that is allowed is linked to a narrative of vulnerability in the long run symbolically leads to the objectification of migration and migrants, and by consequence to their exclusion. This is my criticism to the discourse on vulnerability. It is absolutely not true that all migrants are vulnerable nor bring vulnerability to our system.

<sup>1</sup> See for example the <u>works</u>
<u>of Marjory Harper</u>
(University of Aberdeen) on
historical perspectives on
migration and mental
health in the 19<sup>th</sup> and 20<sup>th</sup>
centuries.



# **Guglielmo Schininà on Trauma and Resilience**

**Dean Ajduković:** Is this vulnerability framework linked to the discourse on individual and societal trauma when we speak about refugee integration and mental health?

Guglielmo Schininà: The trauma discourse transfers the cause of the psychological problems some migrants face somewhere else, to another space and time. Trauma or post-traumatic reactions refer to protracted psychological suffering for something that happened in the past, not something you are subject to in the present. It is politically convenient to say: 'Your suffering does not come from our rules, from all the obstacles to your integration. It comes from something that happened in another time and space, in another system, before us.'

On the other hand, the trauma discourse has also been a reason for accepting migrants, since PTSD was included in some countries among the conditions both 'proving' prior victimisation and preventing repatriation, in case the asylum request was not accepted. As an example, I have spoken to older colleagues from the UK, who told me that in the '80s and '90s, when PTSD was included among the conditions protecting from forced repatriation – at least for the duration of treatment –, they would diagnose PTSD instrumentally, to help migrants stay in the country, or to allow them to complete ongoing treatment for other conditions that would not prevent repatriation. This in turn created a situation in which the government was confronted with alarming statistics on the prevalence of PTSD. Consequently, investments were made on trauma centres to support integration, rather than other forms of integration, thus compounding the myth of the traumatised and unhealthy migrant.

I don't want to downplay the exceptional suffering of people who have been tortured or subject to extreme stress. What I am trying to criticise is the assumption that the majority of people are traumatised, and that trauma becomes another passport for integration.

Dean Ajduković: Where do you see mental health and psychosocial support (MHPSS) coming in here?

**Guglielmo Schininà:** MHPSS is not only about clinical psychology and mental disorders but about all the possibilities that the study of mind, culture, social interrelation, bears for integration. The role of MHPSS is first and foremost to demystify discourses of vulnerability and give agency and voice to people. To consider them a subject and not an object. It is a way to acknowledge suffering without pre-conceptions – listening and framing their suffering the way *they* frame it. **MHPSS is the process of giving voice to people so that they can identify their needs and their resources**.

I am a real believer in Renos Papadopoulos' approach to psychosocial support and to integration.<sup>2</sup> He frames the effects of disruptive events as affecting not only the individual, but also the family and the communities at large. By doing that, he is looking not only at suffering, but also at resilience and adversity-activated development, because people going through hardship develop new skills, new resources and new strengths.

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<sup>2</sup> See the <u>works of Renos</u>
<u>Papadopoulos</u> (University of
<u>Essex</u>) on psychosocial
support and to integration.



To conclude, my question here is: Who is traumatised by whom? The issue of trauma must be expanded to understand that migrants have become the scapegoat for what is a fractured and socially traumatised society in our country.

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## **Alison Strang on Bonds, Bridges and Links**

There are alternative models to the framework of vulnerability and trauma. Alison Strang from Queen Margaret University in Edinburgh is well-known for her work on the UK Home Office 2019 'Indicators of integration framework' which includes a layer of social connections, in the form of social bonds, social bridges and social links. Her work has formed the theoretical basis of the FOCUS approach to dynamic integration.

**Dean Ajduković:** Alison, you have done extensive research and proposed a framework that has been highly influential in the area of integration of migrants and refugees. Can you explain how you view MHPSS in this regard, and how it is connected to your framework?

Alison Strang: My work has been informed both by the humanitarian context, where we are more used to talking about MHPSS, and the integration context, where the high-income countries tend to view integration and migrant well-being from their own society's interests and perspectives. It has been helpful to hold those two perspectives in tandem and potentially in tension in order to highlight that contrast between what is essentially a charity model, embedded in that vulnerability framing, versus a rights and solidarity model.

By framing our responses to people who are forced to flee their homes as 'charity', as helping the vulnerable, we are forcing them into a particular role. Perhaps you could argue that that 'charity model' can be beneficial: It can prompt a response; it can open a crack in the door for some kind of welcome. But it is not a sustainable approach because a charitable response is seen as an optional extra. It builds up the identity of the givers and disempowers the receivers.

'Are we interested in these 'vulnerable' people who are arriving in a settled country that is often assumed to have a static, homogenous society? Is the question: 'How can we plant these people into that existing society in a way that is not going to damage that society?' These are often the policy narratives.

What we have tried to argue is that society is constantly evolving and that we need to look at the well-being of the whole of society and see immigration as one of many aspects of diversity. When we did our first research back in the early 2000s, we explored the perspectives of refugees arriving in the UK, but also of local community

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**Alison Strang** 

members. We also studied the perspectives of other stakeholders and policymakers. We were trying to address well-being for the whole community and to avoid problematising migrants by focusing on the mental health of the arriving migrant.

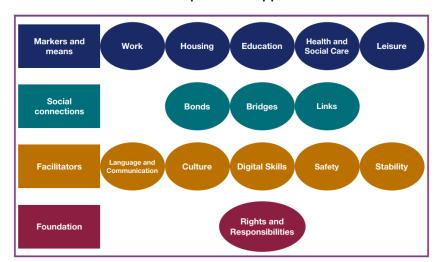


The 'Indicators of Integration' framework and toolkit published in 2019 builds on the original version that we published in 2008. It has been elaborated by the UK Home Office through a consultation process involving academics, practitioners and policymakers.

The 'Indicators of Integration' framework looks at what are the essential characteristics for well-being within society. We identified the core domains that you can see at the top, which are the structures of a stable society enabling access to meaningful work and activity, housing, education, health and social care, and leisure.

The second line refers to social connections. What came out very strongly in our research is that at the heart of integration for ordinary, everyday people (as opposed to policymakers) is the feeling that they can build a life, that they can have these social networks.

One of the key issues that emerged from was that policy and practice needs to be more subtle about how social connections – particularly social 'bonds' – are understood. It is not about how many connections you have, but about the quality of those connections, the level of trust and the opportunity to provide mutual emotional and practical support.



UK Home Office Indicators of Integration framework, 2019

Download full report here

But quality social 'bonds' are not enough for an integrated society. We need to be able to mix and match, move about society and have relationships with people who we would see as being different from ourselves. That is what the social 'bridge' element is about.

The final type of social connection, social, 'links', refers to vertical connections with society as a whole. Do you have a stake in society? Can you vote? Can you access public services? In order to feel at home, to build a life, to integrate and build those relationships across different groups, we each need to know that we have as much right to be here as anyone else.

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In the UK, the lens would be 'trauma' and its impact on mental health. What we, and many other scholars argue is that **the context is crucially important to mental health** – not just the experience of trauma. Most people will either recover from traumatic experiences, and multiple loss, or their mental health will



at least be protected if they are given the opportunity to get on with their lives. The chance to build a sense of identity and feel a sense of control over your life is a significant protective factor for mental health. The Indicators of Integration framework elaborates what needs to be addressed in order to give people that opportunity.

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## **Alison Strang on Community needs**

**Dean Ajduković:** Alison, you haven't mentioned the **threats** that arriving and receiving communities may feel towards each other. Where do these fit in your model?

Alison Strang: I will pick up on the receiving community first because that is perhaps the area where we are most familiar with the threats. Looking at some of the big policy frameworks currently in use across Europe – the OECD, the MIPEX indicators – the one thing identified is discrimination, which comes from a sense of threat from the receiving community: that sense that people who are different from us are coming and threatening our way of life, whether because of economic draining or cultural challenges.

We have seen from our work that where the perspectives of local communities have been embraced, and a **holistic view of society** is adopted, those threats can be effectively dealt with. The model of saying: 'Here's the vulnerable migrant; in order to be a good receiving society, we need to provide them with extra support, look after them, and then all will be well,' **bears the danger of the receiving community then feeling discriminated against**.

The holistic way of looking at it is to say: 'How do we address the needs of this whole community?', so that we are not favouring one minority group over another but taking an asset-based approach: How can the different assets benefit the well-being of the whole? Failure to take a holistic approach is not only a missed opportunity but builds up hostility.

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In the UK – and I think in other parts of the world, too – there has been this idea that we need to disincentivise migrants by creating a hostile environment. But **what we are actually doing is creating an inhumane environment.** We very much saw this over this past year when the COVID pandemic restricted life, where people in our asylum system were effectively taken into detention in hotels. They were provided with no extra funds. There was no processing of asylum claims. They were with a whole lot of strangers. Many

Many different aspects vital to protect well-being were undermined or taken away altogether. We saw some terrible incidents of mental health collapsing and violence breaking out. All that, unfortunately, builds the negative narrative of vulnerability and an unwelcome threat to our peace.

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## Alison Strang & Guglielmo Schininà on Narratives and Engagement

**Dean Ajduković:** How can these psychosocial frameworks be operationalised? How can they help activate both the arriving and receiving community, especially those community members who are not involved in integration or who are critical of it?

Guglielmo Schininà: To start with, we need to change the discourse on vulnerability to one on resilience, on activated developments, in order to change narratives and perceptions. If you are presented as a vulnerable person needing assistance, then obviously you are considered to be a burden.

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Among the elements Alison presented, some are cultural, some are (bio)psychological, some are social or basic needs related. **The three elements coexist**. You cannot give housing without considering what the type of housing will mean from a social-relational or emotional point of view for the person, if it doesn't correspond to what they are used to or what they would like to become. As an example, ghettos are widespread in Europe: you give people housing, but that's the end of any social-relational activity with the outgroup because of where the houses are located. You give education, but the psychosocial dimension of diversity in the education sector should be addressed for all children, both from arriving and receiving communities. Our job is done when we are able to look at the three aspects in everything that we do when we approach people coming from different cultures.

Another point is **resilience**: to look not only at the vulnerability but also at the strength of people. Existing assessments or reports, including the Zaragoza indicators for integration, are positive indicators. But they are only measured towards how they are *not* reached in Europe. **We tend to focus overwhelmingly on the negative when actually the positive is much more interesting.** 

Alison Strang: Scotland is an interesting case example, because it is a context where the political narrative has been very positive towards migrants, particularly refugees. But also, as you know, there is a tension between the Scottish devolved parliament and Westminster, the UK parliament. So, Scotland has had lots of reasons for using very positive narratives around inward migration. I am not implying that every interaction on the ground has been free from hostility, but it is a case example where for political and demographic reasons, inward migration is welcomed for Scotland.

Just recently, the UK government, who are responsible for the asylum process, tried to remove someone from the housing in Glasgow who had used up all their appeals for asylum. The whole neighbourhood came out and demonstrated. It was not one of these manufactured demonstrations with activists stirring it up, at least it started as a genuine neighbourly uprising, which is interesting because it was within quite an economically deprived area. So, **the political narrative absolutely makes a difference.** 

The other question we need to address is: How do we involve those people from the receiving community who would otherwise not care about being inclusive towards migrants? I see so many projects that are lovely, but it is only a small group of local people who get involved, and there are whole neighbourhoods of people for whom it is just not relevant. I do think it is a real priority to look at ways to involve local people in order to build those bridges, which we have said are crucial both for integration and for mental health.

We have started to look at how you give people practice in language learning by using existing community organisations. Instead of setting up a language group and inviting local volunteers to come and help, we had for example a group of car mechanics, guys who worked in a garage. Some refugees were also interested

in car mechanics and, with them, learnt the language. Another example is where established 'Babies and toddlers' groups were funded to work with local refugee mothers and toddlers. It is about finding things of mutual interest and building solidarity around shared purpose.

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On a course we have at the University of Zagreb's Department of Psychology in the previous winter semesters we worked with young refugees together with an NGO in Zagreb who are currently looking for a job, are in transition between two jobs, or have a job but would like to do something else.

We introduced our students to who the refugees were, what was their living situation in Croatia, we also taught them what is a career, what are career plans, how to manage a career and inclusion into the labour market.

And then we had them work with the refugees on a small scale: 10 refugees and 10 students. So, our students were actually career counsellors, but were also receiving input from the refugees about their experiences, their challenges in Croatia.



We received wonderful feedback from both groups: the refugees who now had somebody in the receiving community they could talk to and who showed interest and a lot of motivation to help them, and the students who said this opened their eyes and completely shifted their attitudes.

Jana Kiralj, University of Zagreb

## Alison Strang & Guglielmo Schininà on Sustainability

Linking humanitarian work to long-term international collaboration and peacebuilding raises new challenges of sustainability and the role of government funding. Sustainability and ownership have been a long term concern for various projects.

Alison Strang: I agree that most of the funding is short-term, and that is frustrating in many contexts. Sustainability has to come through empowering and enabling people to take control and be proactive. It is about supporting ground-up response. Even short-term investment, if it were invested more in building up the capacity of refugees and local people to influence and shape their communities, would have a more sustainable impact than very short-term support service provision.



Guglielmo Schininà: Probably the problem is with the word 'project'. Can integration be a project or a series of projects? Shouldn't it rather be a system, a tendency? The issue with using the word 'project' is that migration is perceived more and more as an emergency. Integration, therefore,

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is perceived as something to quickly respond to, an immediate need to prevent, let's say, social troubles. That may create a negative view of the arrival of migrants.

We should not base our approach to integration on projects; we should look at processes and systems. And in order to work on a system, you have to work on its institutions and services. Don't only launch inthe-field projects and put people gardening together but look at existing and long-standing services and institutions, look at what are the gaps and the entry points and invest heavily in them because those are services that stay.

Alison Strang: I was just thinking about the challenge of specialist services. Specialist services for refugees or people from other cultures are great for lots of reasons because they can deliver services and have the

resources to address some of the special issues. But they also tend to cut people off from a more holistic approach to their health, for example, if not handled carefully. As I said earlier, let's not 'other' refugees as opposed to anyone else but recognise all the dimensions of diversity.

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Therefore, the philosophy of **person-centred services** seems to me the healthiest way to go. If real person-centred services were truly delivered, then refugees, along with for example, people with disabilities or

communication difficulties, would be receiving what they need. I have been working in the Scottish policy context for a while now, and that tension between either losing everything by allowing it to be mainstreamed, or losing everything by making it a specific specialist interest, is tricky.

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# Alison Strang, Guglielmo Schininà & Dean Ajduković on Expectations

Attitudes, perceptions and threats are influential indicators of psychosocial integration, but deepseated expectations on the side of both arriving and receiving populations may impact their attitudes. As an organisation and as a society, how can we deal with such expectations?

**Guglielmo Schininà:** When you take the risk to travel, you probably received money from your family and may feel guilty because you left many people behind to look for a better life. When you arrive at a destination, if your life is not as splendid as you thought you tend to portray a positive experience to your peers, not what you are actually facing. The message coming from migrants who arrived wins over any message a foreign institution might launch.



We talked before about the social-relational – the bonding – element. If people have the intention to travel, our role as psychosocial support is to prepare them for the challenges that will come along, also from an emotional, psychological, social-relational point of view.

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Then there are the expectations from the receiving community, expectations and prejudices that also have to be counteracted. The linguist Anne Maass<sup>3</sup> has studied how differences between the ingroup and the outgroup are verbalised. She found that whenever you try to give a positive image of someone of the outgroup, this is perceived by the ingroup as something particular.

You might spend a lot of money and time saying: 'Migrants are great, look at what they contribute.' That contribution will be attributed to the single individual. Remember these episodes at the peak of the refugee crisis, when citizenship was given to people jumping in the river or climbing a building to save a child? These are seen as exceptions. On the contrary, if someone from the migrant community drives while being drunk and kills someone, that would be attributed to the entire community.

Alison Strang: As we know, there are resistances to changing your mind about anything. But evidence suggests that **personal interaction gradually erodes stereotypes**. There is also interesting work around everyday conviviality. Often, we are housing migrants in neighbourhoods with settled population. So, there should be the opportunity for everyday conviviality, but it doesn't always happen because obviously people are making their own choices about who they interact with. So, it's not an easy one and there are no magic solutions. But apart from the political rhetoric, attending to those everyday interactions and how things can be structured to facilitate positive interaction is really important.

Schools are a great context of attitude change in general, and integration in particular. One does see interesting innovations from schools to try to expand their influence beyond the children in the classroom and further to the families. That strikes me as a positive way to go because there is a shared identity. It takes us right back to the issue of solidarity that we touched on at the beginning.

**Dean Ajduković:** Just to share a piece of our research in the FOCUS project related to expectancies: what came out in our focus groups and major surveys was that **receiving community members expect the** arriving refugees to make an effort to become members of the community. And refugees expect the receiving community members to help them do that.

So, expectations come from a very high level down to direct interactions. Both groups said that they would expect the refugees to show an effort or an intention to stay and start building a life, for example through interactions at school. Both saw the lack of interaction, of 'bridges', as a major obstacle for mutual perceptions and relations at higher levels.

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Dean Ajduković

<sup>3</sup> See the <u>works of Anne</u> <u>Maass</u> (University of Padua) on linguistic intergroup bias.



## **Key takeaways from the discussion**

Dean Ajduković: It has been reassuring to hear the antivulnerability perspective and the perspective that healthy populations are having a hard time because of their past, but also of who we are and how we work with them.

My other takeaway is the importance of relationships that can have influence on higher levels such as intergroup relations. There are tools that were illustrated here that also reach up to policy level. But we have to be very aware of who we elect as our leaders.

Alison Strang: We have played around quite appropriately with both the highest of high levels and the very grassroots level, as well as the short term and the long term. We have to keep embracing all those perspectives. We have to be clever about how to create pathways that deliver now, lay the groundwork for future, create those environments, those attitudes of solidarity that we know are needed to build integrated communities in the long term. For me, it has to be about that



grassroots humanity.

Guglielmo Schininà: To me, it's the importance of considering mental health and psychosocial support. Psychosocial support is not only a service to a vulnerable person, but really an informing logic for all the different aspects of integration. It is a way to conceptualise the different realms of integration, looking at them as a composite social. cultural and

psychological elements.



Resilience Creating thresholds Diversity Shared purpose Who is traumatising whom? Social connections As Ingroup/Outgroup

**Rights and solidarity model Holistic view of society** 

#### The FOCUS project

Coordinator Martha Bird | mabir@rodekors.dk www.focus-refugees.eu











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