

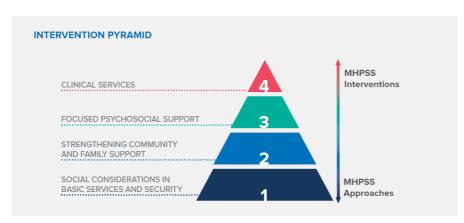
Mental Health and psychosocial support in Mbera refugee camp, Mauritania

January 2022

Our cross-sectoral approach¹ to mental health and psychosocial support²

✓ The mental health and psychosocial support (MHPSS) approach in UNHCR's operation in Mauritania is aligned with UNHCR operational guidance on MHPSS and Inter-Agency Standing Committee (IASC) guidelines and includes multi-layered interventions. MHPSS is integrated in the protection and health response (nutrition, community-based protection) as well as education, and shelter.

IASC pyramid of interventions on MHPSS



¹ https://www.who.int/mental_health/emergencies/guidelines_iasc_mental_health_psychosocial_june_2007.pdf

² UNHCR - Operational guidance, mental health & psychosocial support programming for refugee operations



1. Social considerations in basic services and security

- ✓ The <u>age gender and diversity</u> (AGD) approach is applied and mainstreamed in all protection activities and interventions.
- During the daily management of the camp and the refugee populations, UNHCR ensures inclusive representation through the numerous committees and associations that have been established:

Central Coordination by a community leader

Community Leaders Association composed by 4 female and 4 male zones' leaders, as well as 43 female and 43 male block leaders

Women Coordination Mechanism, where women are represented by a female president along with the 4 female zone leaders and the 43 female block leaders ('femmes ressources') Youth coordination mechanism

Hygiene and sanitation association (VRPC)

Fire brigade

Education Council

Parents' association

Central network for child protection

Committee of people living with disabilities

Conflict resolution committee

Volunteers for the support of persons with special needs

Community outreach workers

GBV committees of female focal points

GBV zonal branches

Health volunteers

- ✓ Basic services (i.e., access to food, security, housing, water and sanitation) are provided in a safe and culturally appropriate manner that promotes equality and dignified access for all refugees.
- ✓ All possible measures are taken to ensure that the needs of persons with specific needs are met (e.g., support in kind and cash for people living with disabilities, nutritional support for breastfeeding and pregnant women as well as for all children below five years old).
- ✓ The nutrition program activities aim to improve the psychosocial well-being of mothers and children.
- ✓ The shelter program promotes psychosocial well-being, considering the social and cultural
 considerations of the site, the concept of culturally appropriate housing and inclusion of
 community and safe spaces to the extent possible.
- Guidance and training sessions on identification and referral of persons in need of MHPSS are regularly offered to UNHCR and partner staff who work daily with refugees.

2. Strenghtening community and family support

- ✓ Four children's spaces have been established in the camp to support the development of children.
- ✓ In the eight primary schools and two secondary schools as well as the kindergartens, teachers receive regular training to strengthen their capacity in the care and well-being of children.
- ✓ Peer educators and children's school clubs enhance community participation and children's psychosocial wellbeing.
- ✓ Teacher focal points have been appointed in all schools to prevent and report possible risks or cases of violence against children.
- ✓ Livelihood interventions consider the resilience needs of vulnerable refugees.
- ✓ Women's community structures have been introduced in refugee communities to build women's capacities.



3. Focused psychosocial support

- ✓ Therapeutic art activities: Drawing activities are offered, by RET, to teenagers and young adults that strengthen self-exploration, manage resentments, strengthen expression, and encourage sharing experiences and support the skills necessary to manage emotions, personal healing, and the reconstruction of one's personal identity
- As concerns children living with physical and/or mental disabilities, recreational and art therapy activities appropriate to the individual needs of each child have started to be offered by qualified personnel working with RET.
- ✓ Recreational and cultural activities: Games, dances, sports, and recreational activities, organized by RET, strengthen the emotional and social development of teenagers and young adults.

4. Specialized mental health services

- ✓ Individual counseling activities: A psychologist, working with RET and based in the camp, provides individual psychotherapeutic care daily. Similarly, a psychologist working with CRF, visiting the camp every two months, for two consecutive weeks, conducts training to community members and health workers in the camp on psychosocial support as well as individual counseling sessions.
- ✓ Group therapy: The psychologists (RET and CRF) also offer support to caregivers of patients with psychiatric disorders, working with families and groups sharing a common problem. The main objective of the discussion groups is to strengthen self-care (caregivers) through the exchange of experiences as well as the development and strengthening of personal resilience.
- ✓ As concerns the prevention and response to gender-based violence (GBV), a confidential referral system has been established in the community to respond to the needs of survivors, including psychosocial assistance, with the presence of a psychologist and a mental health service unit.
- ✓ A mental health nurse has been assigned to the Mbera camp health centre by the Ministry of Health, and space has been allocated for consultations, treatment, and protection interventions.

To date, the cases received in consultation by the mental health nurse are either referred cases (by NGOs, community, health posts or the security service) or spontaneous cases. A total of **46 mental health cases** are monitored, the most frequent pathologies being psychosis, depression, and epilepsy.

- ✓ The WHO list of essential medicines for the treatment of mental health pathologies has been validated and ordered and the medicines are available at the health centre.
- ✓ As part of capacity building, a mental health training in mhGAP has been organized with the support of an international consultant specializing in mental health and psychosocial support, targeting general practitioners and nurses. A total of three doctors and four nurses and a mental health nurse specialist, from the health facilities of the camp and the nearby town of Bassikounou were trained. Seven Mauritanian Red Crescent volunteers were also trained on the basic aspects, allowing them to identify and refer cases that need mental health care and/or psychosocial support
- ✓ During the second half of 2021, the CRF psychologist went twice on mission in Bassikounou and in Mbera camp as part of supervision, follow-up, and continuous training of the nurse specialist in mental health on the psychosocial support aspect.
- Community follow-up of mental health cases is also provided by community relays/ outreach workers and volunteers and, if necessary, by the mental health specialist nurse.



To this day:

1,204 young people and adolescents have benefited from the therapeutic art activities programme,

refugees have benefited from specialized psychological support services: 700 through group counseling and 112 through individual counseling,

1 140 adolescents and young adults have benefited from sports and cultural activities organized in psychosocial support centres,

42 beneficiaries are participating in the recreational therapeutic art activities recently initited in favor of children and adolescents suffering from mental health disorders.

5. Unmet needs and recommendations

Staffing:

- ✓ Some mental health patients are physically restrained by their caregivers and family members at home. Additional resources (adapted infrastructures and specialised staff) would be needed to strengthen the capacity of hospitals in the *moughataa* of Bassikounou and the Hodh Chargui region to receive and care for these patients. Awareness-raising sessions should be organised for caregivers on the issue of mental distress (through psychoeducation) and referral to professional assistance
- ✓ Additional specialized staff would be needed to offer individual counseling activities for single mothers, including GBV survivors, taking into consideration the need for care arrangements for their infants (pre-school age children) during the counseling sessions.

Equipment and logistics:

- ✓ Additional space needs to be identified and rehabilitated to serve as isolation space for agitated patients for use if required.
- ✓ Injectable medication is unavailable and required.
- ✓ Acquisition of recreational equipment (toys) for children with intellectual or learning disabilities.

Capacity building:

- Training of all medical staff on the treatment of rape victims according to national and international protocols is required.
- ✓ Training of medical staff on the treatment of severe mental health cases is required, as currently those competencies are not available in the health facilities of the camp.
- Specialized training of educational staff on the needs of children with intellectual, learning or other disabilities (i.e. mobility, visual or hearing impairment).
- ✓ Extension of therapeutic art activities to more teenagers and young adults, given the camp composition.

Community-based outreach:

✓ Creation of a pool of community peer workers (possibly identified through group therapy activities), trained on mental health issues specially on Psychological First Aid, Stress management, Psychoeducation, as well as low intensity psychological support interventions, capable of identifying mental health disorders, providing peer support via lived experience in real time, linking families to available and suitable mental health services, and ensuring a regular follow up of the cases.



✓ As part of outreach activities: increase community awareness on mental illness and mental disability