FARO MODEL HANDBOOK
MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT TO UNACCOMPANIED MINOR MIGRANTS AND FAMILIES WITH CHILDREN UPON FIRST RECEPTION
In the past years Italy has become a migration territory for many minors, arriving with their families or alone after endless journeys.

Foreign minors demand complex reception and treatment procedures, since they have unique care and protection needs.

They are often victims of violence, wars, bereavements, deprivations, loss of their cultural references. The migration journey of unaccompanied foreign minors in particular, implies the loss of all that is familiar: home, language, social networks, without being able to benefit of the support of attachment ties which could mitigate these losses. Moreover, these children and teenagers, boys and girls, incur in high risks during their migration journey and face an uncertain future.

Minor migrants, if not properly supported, may develop risky habits, often accompanied by a series of already developed psychosocial issues, such as anxiety, depression, behavioural troubles and syndromes related to trauma. These behaviours could be exacerbated by the arrival in the host country, if the reception system and the integration support do not immediately take into account these issues in a systematic and proper manner.

In this complex and difficult setting, the Faro project of Terre des Hommes Italy represents an attempt to efficiently meet the needs of unaccompanied foreign minors or children coming with their families; it is an incentive for policy-makers and professionals dealing with migration.

The model focuses its psychosocial intervention on one fundamental aspect: treatment continuity which is still lacking in our country’s reception policies. Minors participating in the Faro project, whenever possible, are monitored and followed over time; their psychosocial needs are met and their stories are listened to.

This aspect is absolutely key to ensure an adequate treatment for these children and teenagers, especially taking into account their previous traumatic experiences. Dealing with psychological trauma requires a careful analysis of its effects over time, of its impact on the individual’s functioning, of its deceitful pervasiveness which often hinders professionals from considering minors’ unease as a post-traumatic consequence.

The Faro project provides an important interpretation of the problem: it takes into account the temporary aspect of the trauma, which goes beyond the post-traumatic consequences and the clinical intervention. It represents for minors a first window on the future through prevention and a long psychosocial work. It often also helps other agencies dealing with these individuals, such as the judiciary system, schools and the social services themselves.

The Faro project is in a way the forerunner of the government bill C 1658-B (now law no. 47), better known as the recently approved “Zampa law”. This law represents an important step forward for migrant children on our territory. It introduces a series of important changes to the current legislation on unaccompanied foreign children with the purpose of defining a coherent protection and reception system at national level, which can reinforce protection tools already provided for by the law and at the same time, ensure an homogeneous application of norms over the whole national territory.

Terre des Hommes has always been working to offer a system guaranteeing homogeneity, protection and reception with the purpose of integration and prevention.

Hopefully, this synergy will lead to a consistent system response, where professionals working with Terre des Hommes will intervene in a more favourable context to accompany these children towards their future, putting in the past, thanks to an adequate treatment, their traumatic experiences and migration journey which a child should have never lived.

Vittoria Ardino
President of the Italian Society of Traumatic Stress Studies

They come from Eritrea, Somalia and Sudan, they cross the desert herded in pickups and then they get on board from Libya. Or they try to reach Egypt. They leave their families in Nigeria, Gambia, Ivory Coast and they arrive in Algeria, the rendezvous point of the second part of their journey. Kids and children coming from Afghanistan or Pakistan or Iraq, they mostly pass through Turkey or Greece. They embark in Patras to the Apulian coasts.

I met them for the first time in 2011, when, following the Arab Spring, they landed in large number in Lampedusa. Since then, also thanks to humanitarian associations and NGOs such as Terre des Hommes, I get to know them and to understand the reasons of their escape and the tragedy of their journeys.

To them, brave and generous boys and girls able to challenge their lives to help their mothers and brothers, Pope Francis wanted to dedicate the message for the world day of migrants and refugees: “Among migrants, children constitute the most vulnerable group, because as they face the life ahead of them, they are invisible and voiceless: their precarious situation deprives them of documentation, hiding them from the world’s eyes; the absence of adults to accompany them prevents their voices from being raised and heard. In this way, migrant children easily end up at the lowest levels of human degradation”.

Their testimonies leave us speechless, struck and lost, as well as aware that young people and children can suffer so much pain as reported by a Nigerian girl: “I do not know who looked at me from the sky and decided that I would have survived. It just happened. Suddenly, a night they brought me and another girl out from the prison and, dragging us by the hair, they put us on a boat. We were like slaves but there was the hope of arriving at destination. They forced us to drink salt water and they left us on the boat without anyone to navigate it. At the mercy of the sea, drifting. Now that I am in Italy, and I am healthy and fixed, I just want to go to school and read as much book as possible. Simply live a lot of stories, all different from mine”.

“Now that I am in Italy …”, the girl says she is “fixed” finally. Now that she is in Italy, our responsibility towards her and all the other kids is clear and unquestionable. It derives from the respect of the International Convention on the Rights of the Child, that compels us to look after all of them, to protect them and to encourage their growth. Because these girls and boys – to whom our responsibility and caring should go beyond national borders, by preventing that their lives are put at risk during tragic travels by land or sea – are above all minors. They are not “migrants”, they are not “foreigners”; they are minors. And if none minor should be forced to leave home, mom, dad, brothers and sisters, and if we cannot or we are not able to avoid it, we should at least prevent her/him from another journey, new perils and pains that could jeopardize his/her own life.

We must ensure that the right to be “fixed” and to have a new chance of life is granted and exercised. This is what Terre des Hommes does also through this publication with the evocative title Faro (lighthouse), a strong light that is the guide for all these brave kids towards their journeys of hope.

MP Sandra Zampa
Vice president Committee for children and adolescence
Terre des Hommes Italy, an international wide-ranging ONG, focuses its institutional mission on the protection of vulnerable children. By virtue of this mandate Terre des Hommes is required to work in several parts of the world, especially in the Middle Eastern main conflict areas.

One of the phenomenon on which Terre des Hommes has been focusing for years is that of unaccompanied minor migrants, a topic which has been tackled by the Foundation at different angles in the past years. As a matter of fact, the publication of the nation-wide research “Errant minors- Reception and protection pathways” dates back to 2009 and already underlines the disorganisation of a reception system which is too unpredictable for a minor migrant seeking protection, due to its lack of homogeneity across the territory and poor regulation. In 2014 we published the first “Psychosocial handbook for social workers in charge of receiving unaccompanied foreign minors”. This historical commitment is also nurtured by the wider work of the Terre des Hommes International Federation, which is also at the forefront of the protection of minor migrants with the international campaign “Destination Unknown”. This campaign aims at promoting awareness, protection, care and assistance for those minors forced to flee from different parts of the globe, during every step of their journey. The Faro project “Psychological and psychosocial support in favour of unaccompanied foreign minors and families with children coming to Sicily by sea”, conceived and coordinated by Terre des Hommes Italy, mainly in Sicily, is a flagship project of this campaign, given its key role in a country of landing such as Italy. This “Faro Model Handbook” represents a synthesis work perfectly fitting in this framework of activities, given that psychosocial support is a common denominator of the majority of Terre des Hommes projects in several parts of the world. Just to name a few: the emergency and post-emergency projects in Syria, Lebanon and Jordan which, in 2015 alone, reached more than 1 million beneficiaries, children and families refugees fleeing from war and violence.

In these circumstances Terre des Hommes provides operational tools for its psychosocial activities, taking inspiration from internationally accepted principles, such as the “IASC Guidelines on Mental Health and Psychosocial Support in emergency contexts” (2007) and the “Keeping Children Safe - Toolkit of Child Safeguarding” (2011). One of them is the handbook created by the staff of Terre des Hommes Lebanon “Working with children in emergency. Child protection, psychosocial support, and structured recreational activities” (October 2015). It is a document which bases and structures psychosocial work in this specific context and from which this Handbook in its own way takes inspiration.

The “Faro Model” pertains to this overall picture; it aspires to standardise the experience of a multi-year project, unique in its kind in Italy. Its aim is to capture the specific characteristics given by the context, the problems and needs of alone minor migrants facing the Italian first reception system, as well as the priority actions which are absolutely necessary in every intervention to give migrants a proper psychosocial support.

Donatella Vergari
Secretary General
Terre des Hommes Italy Foundation

---

1 By Giuliana Candia, Francesca Camboli, Federico Girandoli, Publisher Ediesse, 2009.
3 www.destination-unknown.org This Campaign includes more than 100 projects in 48 countries.
In 2015 65.3 million people all over the world had to flee from pov-
erty, natural catastrophes, wars, violence in order to seek safety or
a hope of life. It was the highest
count of displaced people ever
recorded on this planet. Of those
people, 21.3 million are refugees and
3.2 million are asylum seekers. An
asylum seeker has to wait for comp-
tent authorities (in Italy the Territorial
Commissions for the Recognition of
International Protection) to take a
decision regarding his/her application
for protection in order to be able to
change his/her status. More than half
of refugees are less than 18 years old.

Currently, Syria is one of the main
countries of origin of refugees; from
2011 to 2015, due to the conflict, an
increase of 55% of refugees was re-
corded, adding up at the end of 2015
to 4.9 million refugees. The majority
of these refugees are taken in by nearby
countries: Turkey (2.5 million), Lebanon
(1.1 million), Jordan (628,000) and Iraq
(244,400). The consequences of this
phenomenon are recorded in Europe,
where data confirm the unstoppable
flow of migrants coming to the Old
Continent.

Analysing the last three years, it is clear
how Europe should play a key decisive
role in the reception of these people. It
is also evident how what is often called
“Fortress Europe” is not up to this
challenge, apparently only being able to
close itself up and avail itself of policies
inspired by control and safety principles.

In 2015 more than 1 million people
came to Europe, the high majority
of which (around 900,000) through
Greece and a little more than 100,000
through Italy.

During 2016, first of all because of the
agreement signed by Europe and Turkey
and then due to the following clo-
sure of borders in the so-called Balkan
Route, a plunge of arrivals was recorded
(79% in Greece), while on the contrary,
arrivals started to increase again in Italy
(+6%). In 2016 503,700 migrants en-
tered Europe, of which 364,000 arrived
by sea, of which an astonishing 181,436
landed in Italy. In the first three
months of 2017, according to the UNHCR,
29,758 people arrived in Europe by
sea, the majority of which through Italy
(24,241).

Unaccompanied foreign minors (ac-
ronym UFM) — the most vulnerable
group of migrants, keep on increasing,
reaching today a percentage close to
15% of total arrivals in our country.
In the last three years the percentage of
minors arriving alone has risen expo-
nentially, from 7.7% in 2014 to 14.2% in
2016 out of the total number of mi-
gants. Out of 10 landed minors, 9
are unaccompanied foreign mi-
 nors.

According to the Ministry of Labour
and Social Policy, by 31st December
2016 there were 17,373 unaccompanied
foreign minors on the Italian territory,
that is an incredible increase of 45.7%
in comparison to last year. However,
more than 6,000 (a third) of them were
untraceable, since they ran away
the day after the landing or shortly
thereafter, fleeing from first reception
centres with obvious risks to their phys-
ical and psychological safety.

The most common nationalities of these
minors, usually between 15 and 17
year old (except for Egyptians, where
the average age is lower; with minors
between 10 and 11 years old) are:
Egyptian, Gambian, Albanese, Eritrean,
and Nigerian. Those who decide to flee
from reception centres are mainly from
Egypt, Eritrea, and Somalia.

Therefore, a special attention and dedi-
cated care should be paid to the flow of
these children and teenagers, since the
very first hours following landings, in
those places and facilities dedicated to
their “first reception”.

The Faro Project originated from all
these considerations, its experience
based on the principles of psychosocial
support and mental health in emergency
situations is gathered in this document.

Migrants, Landings, Identity

Landings are not only the happy ending
of a sequence of events - leaving one’s
own country, the journey, the ship-
wreck, being rescued at sea, which
could have deeply marked the people
involved, so as to need some form
of material, medical and psychological
support.

Ports where migrants land are not only
the backdrop of humanitarian interven-
tion.

These processes are fostered in some
way by humanitarian rescue, whenever
landings are treated as natural calami-
ties, whenever rescuing is about bodies
to observe, treat, feed and clothe,
whenever the migrant is only seen as
a naked body separated from his/her
story, from his/her social and political
causes.

This is why it is necessary that each
humanitarian worker carry out a careful
and thorough consideration of his/her
own role, purpose and proper approach

Chapter 1

IMMIGRATION AND
UNACCOMPANIED MINORS:
A GROWING PHENOMENON

Chapter 1
to migrants.

Whether we talk about Hotspots, First Reception Centres (CPAs) or Extraordi- nary Reception Centres (CASIs), places dedicated to UMFs are somehow not in- cluded in the notion of hospitality which would normally imply sharing an urban place as well, also considering that they are rather treated as marginal products of order and safety policies11. First of all, we are talking about other places, heterotopic places which Foucault de- scribes as follows: “Places of this kind are outside of all places, even though it may be possible to indicate their location in reality” does not apply. In this context, these places are characterised by three main features: extraterritoriality, exception, and exclusion.

In this reception circumstances, minor migrants witness a double exclu- sion from these places: they are not in their own country of origin anymore, which they left fleeing, but they are not in the host societies either. In the places where they live are located “outside”, at the limit of normality, often outside residential areas. Extraterritoriality goes hand in hand with the condition of exception, since minors live in a “grey” area, at the bor- der of social order, constantly threat- ened to be removed from the “inside”, i.e. from the world of citizens.

Waiting for the assignment of a guard- ian, facing bureaucratic obstacles during the procedure to obtain docu- ments, receiving negative answers by the institutions in charge, assessing their asylum application; this all contributes to a lack of recognition of political and juridical equality between migrants and ordinary citizens.

Being banned from places and the condition of exception are the causes leading to social exclusion with medium- and long-term effects. In fact, gathering several individuals in other places leads to the creation of new communities of unaccompanied minors without identity, new categories of marginalised people. In this case, the indi- vidual - often called illegal immigrant, clandestine” (term which is not only ri- biting, but also founded on a disregard of the meaning of the term itself, since migrants are not “those who hide”, like clandestine people), “refugee”, “UMF”, is defined by others and can hardly manage to ob- tain legitimacy to emerge as a political entity with his/her own voice.

Indeed, the aid relationship between the UMF and the actors of the re- ception system is characterised by an inherent asymmetry, well described by an African proverb: “the hand that donates is always higher than that which receives”. The minor migrant often does not receive.A: he/she is simply asked to conform to the role of “user”, as passive beneficiary of a package of aid measures, sometimes even highly inap- propriate. This imbalance of power is even more evident considering the fact that for a chance to obtain a citizenship, minors need to accept the passive situation and manage their inactive wait 12. This way of thinking is embodied in all kinds of prizes, given by different actors at different levels: “calm- est” or “less problematic” UMFs.

On the contrary, various kinds of refusal shown by public authority or the control perpetrated by institutions open the eyes of minor migrants who see the inequality of the aid relationship. They realise that in the country of arrival, all forms of violence, a structural violence13, are carried out; this kind of violence, if integrated in dispositions and embodied by all involved actors, becomes collective violence14. Besides being carried out in absolutely unacceptable ways in a civi- lised country claiming to be welcoming, this violence reinforces these relation- ships within the context of intervention.

Therefore, whoever works in these set- tings needs to think about the dynamics of power14, and about his/her own role; that implies questioning, on a personal and professional point of view, one’s own position within the system.

The need to face a situation defined as “ongoing emergency” often justifies a series of malfunctions which perhaps make staying in reception centres almost an iatrogenic experience. This is also due to the above-mentioned dynamics which completely affect insti- tutional and personal relationships in various stages of the reception system. On the one hand, workers must ques- tion whether and how they are carrying out these dynamics and why the recep- tion roles are not compatible with the system of control. On the other hand, they have to ponder about which interventions could make experience of reception in Italy less traumatic.

Therefore psychosocial workers work in a difficult and contradictory field, where minor migrants need to face the reality of a system silencing the people to whom it is addressed. Far from being an invitation to give up, these considerations are food for thought, pushing us to think about the role of such system in the different contexts where it operates.

Borrowing Sayad’s words we could say that psychosocial intervention goes hand in hand with a reflective think- ing questioning the social conditions and power relationships at the basis of the intervention itself.

Trying to deeply understand the context and questioning one’s position within it - in settings where “doing” leaves no space and for “thinking”, does not mean that one is necessarily free from the rescue rhetoric. But it certainly helps to move carefully and with humbleness in order to try and identify arising needs, taking into account their complexity and extent, and organising adequate responses for what concerns materials and respect of the humanity and culture of others.

Such a vision is effectively linked to the theory and methodology created within the context of clinical analysis of migrants15 taking account of the theme of trauma and “wounded systems”16 and humanitarian psychology, supporting the central role of the individual enjoying full dignity and fundamental rights.

11 Vacheresse, 2005.
12 Gallico, 1969.
13 Aubert, 1990.
14 Ferris, 1999; 2002.
15 Sayad, 2002; p. 17.
16 More et al., 2003; Cooper, 2013; Lous, Nathan 2003; Zartman, 2000; Lupu, 2005; Fraser, 2006.
17 Arneil, 2009; Beneduce, 2010. To know more about this approach in relation to other cultures, one can Krügel, 2008 and Pavrase, 2004.
18 Deatherage, 2015.
19$where$ \((1984)$.
20 Borrowing Michel Agier’s definition of “Hotspot”, a place that can be absolutely inacceptable ways in a civilised society, facing bureaucratic obstacles and any kind of power relationships at the basis of the intervention system, receives”. The minor migrant often witnesses a double exclusion, since the places where they are not in their own country anymore, which they left fleeing, and are thus not properly equipped to take care of their needs. This is true for many reasons, but the lack of qualified places etc. These are all underlying factors leading to high levels of confrontation between guests.

Furthermore, apart from what is observed within the walls of these first reception centres, the services of the territory struggle to play a really active role in the monitoring, control and care of the people housed there, due to the lack of human resources at their disposal, but also due to the lack of an appropriate technical training to man- age, understand and recognise problems related to migrant minors. Terre des Hommes has often detected this factor in the field, in collaboration with the Territory.

Terre des Hommes has bridged this gap, providing a constant counselling activity for both social and territorial services of the territory facing the challenges of managing body operators, whenever needed21.

21 Terre des Hommes Countryside-People’s Health Authority Synthesis “Vulnerability and health and legal priorities: an analysis of the situation of minor migrants in Italy” 2015.\footnote{Terre des Hommes is a member of the Confederation of the European Voluntary Organizations (CEV), a network of volunteers and non-governmental organisations (NGO) supporting the work of the European Voluntary Service (EVS) and the European Solidarity Year (ESY). The CEV supports its members by providing a platform for coordination, making common points to the authorities and international organisations, and giving technical assistance. \footnote{(1999-2004) of the “National Asylum Programme” in Italy. The first period covered the implementation of the reception of asylum seekers and the second period, from 2005 to 2010, from the implementation of a “National Asylum Programme” in Italy. The first period covered the implementation of the reception of asylum seekers and the second period, from 2005 to 2010, the extension of the Reception System for Refugees and Asylum Seekers (SPRAR).}

The Reception System for UMFs in Italy

Unaccompanied foreign minors are those foreign minors living in Italy with- out any asistance and representa- tion by parents or other adults, legally responsible for them according to cur- rent laws in the Italian judicial system.

Therefore, besides being relevant to completely alone minors, this definition also applies to minors with adults other than parents, who are not the guardians or foster parents according to an official measure, since these minors do not benefit of a legal representation according to Italian jurisdicion.

The recently approved Zampa law (no. 47) also includes in the definition of unaccompanied foreign minors those minors seeking international protection, compliant with the relevant regulation no. 97/C/1/103 of the Council of the 26th June 1997. As a matter of fact, they were not included in this catego- ry up until now, as a minor in such a specific situation (seeking international protection) were not also foreign and unaccompanied.

According to Italian jurisdicion17, after being rescued, an unaccompanied for- eign minor must be immediately trans- ferred to a safe place and all measures aiming at his/her protection must be put in place, such as: provide legal protec- tion and report to the Public Prosecu- tor as the Juvenile Courts.

A minor who has just landed is tak- en into charge by the social services belonging to the place of landing and he/ she is transferred, following different delays and manners according to each zone, to first reception facilities such as First Reception Centres (CPAs), Extraordinary Reception Centres (CASIs), first reception facilities opened on the basis of the “Interagency Action and Integration Fund (AMFI)” call for proposals of the Ministry of the Interior, whose differ- ences are not going to be discussed in this report.

PROMOTION AND DEVELOPMENT OF FAMILY FOSTERING

Hitherto, if a minor applied for asylum, he/she was transferred to a SPRAR18. However, it is important to stress that minors currently stay in the “first re- ception phase” for a long period which is provided for by law. Indeed, the aver- age duration of stay in Sicily significantly exceeds the 90 days provided for by the Decree of the President of the Sicilian Region (DPRS) no. 600 of 12th August 2014. Terre des Hommes has witnessed this situation during its long activity on the island and has recorded peaks as high as 12/14 months of stay.

This problem does not rely solely on the fact that the minor is thought to have a longer stay than expected in facilities which were conceived for a temporary reception and are thus not properly equipped to take in charge the individual, due to the lack of qualified services (such as social, educational, healthcare, and psychological support). A worker providing psychosocial support also has to deal with various dysfunctions.
The “IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings”24, published in 2007, still represent an essential reference for all those organisations and communities facing emergency situations. Terre des Hommes also draws on these guidelines for its work both in Italy and outside; as we will see, this is reflected in first reception activities described in this report, which Terre des Hommes carries out in Italy with unaccompanied foreign minors and families with children.

The IASC Guidelines were issued on an initiative of the United Nations21 with the purpose of:

» Coordinating interventions of several humanitarian organisations

» Providing a series of shared and articulated recommendations to protect the mental health and psychosocial well-being of those populations in emergency settings, i.e. “situations arising from armed conflicts and natural disasters (including food crises) in which large segments of populations are at acute risk of dying, immense suffering and/or losing their dignity”.

It is important to underline that this definition22 includes the phenomenon of migration which has been massively affecting our country, especially Sicily, in the past years.

Mental Health and Psychosocial Support

The two terms Mental Health and Psychosocial Support are clarified, since the comparison between mental health and psychosocial support is still object of debate.

The Guidelines state that:

“The composite term mental health and psychosocial support is used in this document to describe any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder. Although the terms mental health and psychosocial support are closely related and overlap, for many aid workers they reflect different, yet complementary, approaches. Aid agencies outside the health sector tend to speak of supporting psychosocial well-being. Health sector agencies tend to speak of mental health, yet historically have also used the terms psychosocial rehabilitation and psychosocial treatment to describe non-biological interventions for people with mental disorders.”

Exact definitions of these terms vary between and within aid organisations, disciplines and countries.

As the current document covers intersectoral, inter-agency guidelines, the composite term mental health and psychosocial support serves to unite as broad a group of actors as possible and underscores the need for diverse, complementary approaches in providing appropriate supports”23.

Terre des Hommes completely agrees with this last statement and has organised its on-field interventions accordingly. As we will see later on, every team working in all Faro project editions is multidisciplinary and develops its activities on all four levels of needs in emergency settings, as divided in the pyramid of mental health and psychosocial support interventions (also see page 13).

The Terre des Hommes staff working in Sicily always includes a psychologist, a cultural mediator and a sociologist or anthropologist, according to each case. The child neuro-psychiatrist or the referring psychiatrist, necessary to refer or jointly manage cases both in the diagnostic and therapeutic stage, are chosen within the local Health Service team. This experience is generally positive, as shown by treated cases, some of which are going to be described afterwards, during the introduction of the activities of the team.

The 6 Main Principles

The IASC Committee’s vision on how to operate in emergency settings is based on six fundamental principles that are then applied in each action suggested according to different phases of emergency. These are particularly important principles, both for what concerns the ethical and the operational point of view.

Terre des Hommes, as far as its competences go, has applied these principles in its work and, as we will see, its workers follow them with resoluteness and perseverance.

21 The Inter-Agency Standing Committee - IASC was set up by the General Assembly of the United Nations; it is an inter-agency forum whose purpose is to coordinate, policy development and decision-making of executive officers of the main humanitarian agencies (UN agencies, Red Cross and Red Crescent together with the union of humanitarian non-governmental organisations).

22 They are based on the considerations that “armed conflicts and natural disasters cause significant psychological and social suffering in affected populations. The psychological and social impacts of events may outlast the acute period of disaster, undermining the long-term mental health and psychosocial well-being of the affected population. These impacts may therefore persist, have negative impacts on human rights and development”.

23 http://reliefweb.int/iasc/guidelines#iii. IASC provides some examples of situations considered as “emergencies”.

24 Scientific evidence regarding mental health and psychosocial support capable of demonstrating what is more efficient in emergency settings, is still scarce. The majority of research in this field was carried out months or years after the end of the acute phase. For this reason, what is here described as mental health and psychosocial support, is mainly based on the experience of workers and what research will develop, is much as the on-the-field experience of practitioners. The report therefore regularly updated with the purpose of gathering future evidence emerging from new research.
Chapter 2

1 - HUMAN RIGHTS AND EQUITY

“Humanitarian actors should promote the human rights of all affected persons and protect individuals and groups who are at heightened risk of human rights violations. Humanitarian actors should also promote equity and non-discrimination. That is, they should aim to maximise fairness in the availability and accessibility of mental health and psychosocial supports among affected populations, across gender, age groups, language groups, ethnic groups and localities, according to identified needs.”

Although they are focused on minors and families, Terre des Hommes interventions do not exclude altogether all migrants, whose needs should be attended to, especially in difficult settings such as port docks and/or Hotspots, where it would not be possible to immediately distinguish minors from other migrants.

2 - PARTICIPATION

“Humanitarian action should maximise the participation of local affected populations in the humanitarian response (...). Participation should enable different sub-groups of local people to retain or resume control over decisions that affect their lives.”

This is an essential element common to all activities of the Faro project. The project always starts from an active involvement of the users to find support pathways appropriate for them and it always has the objective of building an independent thinking and develop an understanding of the purpose of one’s presence in the reception place.

3 - DO NO HARM

“Humanitarian aid is an important means of helping people affected by emergencies, but aid can also cause unintentional harm. Work on an mental health and psychosocial support has the potential to cause harm because it deals with highly sensitive issues.”

This factor is carefully taken into account by Faro workers who, before taking any action, verify whether other actors and/or services are already implied, which could already provide an identical response to the user’s needs as that of the project, thus avoiding dangerous overlaps which would damage the user.

4 - BUILDING ON AVAILABLE RESOURCES AND CAPACITIES

“All affected groups have assets or resources that support mental health and psychosocial well-being. A key principle – even in the early stages of an emergency – is building local capacities, supporting self-help and strengthening the resources already present. Externally driven and implemented programmes often lead to inappropriate, MHPSS (Mental Health and Psychosocial Support) and frequently have limited sustainability. Where possible, it is important to build both government and civil society capacities.”

This principle is applied on two levels. Each action of Terre des Hommes aims at making the migrant an active part of the activities where he/she is involved, as well as making him/her an individual aware of his/her rights and how to claim them. At a second level, the collaboration between Terre des Hommes with Prefectures, Provincial Health Units (ASPs), Territorial Social Services as well as local associations working to support the reception process and the social integration of migrants, further demonstrates that the organisation’s approach follows this principle.

5 - INTEGRATED SUPPORT SYSTEMS

“Activities and programming should be integrated as far as possible. The proliferation of stand-alone services, such as those dealing only with” specific target groups “can create a highly fragmented care system. Activities that are integrated into wider systems (e.g. existing community support mechanisms, formal/informal school systems, general health services, general mental health services, social services, etc.) tend to reach more people, often are more sustainable, and tend to carry less stigma.”

Faro applies this principle, constantly connecting territorial services and the centres where it works, in order to avoid negative consequences on the well-being of hosted minors.

6 - MULTI-LAYERED SUPPORT

“In emergencies, people are affected in different ways and require different kinds of supports. A key to organising mental health and psychosocial support is to develop a layered system of complementary supports that meet the needs of different groups. This may be illustrated by a pyramid (see Figure 1). All layers of the pyramid are important and should ideally be implemented concurrently.”

It is worth reminding that the quantity of groups requiring those types of support listed in the pyramid substantially decreases, going from the base towards the top.

PYRAMID OF AID SERVICES IN EMERGENCY SETTINGS ACCORDING TO IASC GUIDELINES

- Basic services and security
- Community and family supports
- Focused non-specialised supports
- Specialised services

---

25 Some examples: 1) Planning and joint implementation of awareness-raising of Terre des Hommes Syracuse ASP for guests of a reception centre about to take the Mantoux test. These activities enabled to reassure guests, making them aware of the necessity and utility of the test. 2) Organization of technical workshops for social workers and territorial services to extend the accessibility of forensic courses supported by the local CMAR (Medico-Legal Affairs) and to develop a continuous training. 3) Participation of Faro staff in trainings about psychological support in emergency settings, organized by other territorial actors.
SERVICES FROM THE BASE TO THE TOP OF THE PYRAMID

COMMUNITY AND FAMILY SUPPORTS

The second layer represents the emergen-
cy response for a smaller number of people
who are able to maintain their mental
health and psychosocial well-being if they
receive help in accessing key community
and family supports. In most emergencies,
there are significant disruptions of family
and community networks due to loss, dis-
placement, family separation, community
fears and distrust. Moreover, even when
family and community networks remain
intact, people in emergencies will benefit
from help in accessing greater community
and family supports. Useful responses in
this layer include family tracing and reuni-
fication, assisted mourning and communal
healing ceremonies, mass communication
on constructive coping methods, sup-
portive parenting programmes, formal
and non-formal educational activities, and
the activation of social networks, such as
through women’s groups and youth clubs.”

The Faro Project includes all orientation
activities explaining the services put at
the migrant’s disposal in different set-
tings and makes sure that these services
and the users are well connected. As
an example, it is worth mentioning the
work carried out in the Augusta port
dock. The staff has helped first of all mi-
nor migrants and the families gain access
to several services at the port, which
are not immediately recognisable to
users, so that they could actually enjoy
their right to be treated, to be reunited
with a family member etc. 

BASIC SERVICES AND SECURITY

According to the IASC Guidelines “The
well-being of all people should be protected
through the (re)establishment of security,
adequate governance and services that
address basic physical needs (food, shelter,
water, basic health care, control of com-
municable diseases). A Mental Health and
Psychosocial support response to the need
for basic services and security may include:

» advocating that these services are put in
place with responsible actors;

» documenting their impact on an mental
health and psychosocial well-being;

» influencing humanitarian actors to deliv-
er them in a way that promotes mental
health and psychosocial well-being;

» mobilise community networks”.

These basic services should be established
in participatory, safe and socially appro-
priate ways that protect local people’s
dignity, strengthen local social supports and
mobilise community networks”.

The Faro Project includes all orientation
activities explaining the services put at
the migrant’s disposal in different set-
tings and makes sure that these services
and the users are well connected. As
an example, it is worth mentioning the
work carried out in the Augusta port
dock. The staff has helped first of all mi-
nor migrants and the families gain access
to several services at the port, which
are not immediately recognisable to
users, so that they could actually enjoy
their right to be treated, to be listened
to, to be protected, to be reunited with
a family member etc. 

FOCUSED, NON-SPECIALISED
SUPPORTS

“If” The third layer represents the supports
necessary for the still smaller number
of people who additionally require more
focused individual, family or group inter-
ventions by trained and supervised workers
(but who may not have had years of
training in specialised care). For example,
survivors of gender-based violence might
need a mixture of emotional and livelihood
support from community workers. This
layer also includes psychological first aid
and basic mental health care.”

SPECIALISED SERVICES

“The top layer of the pyramid represents
the additional support required for the
small percentage of the population whose
suffering, despite the supports already
mentioned, is intolerable and who may
have significant difficulties in basic daily
functioning. This assistance should include
psychological or psychiatric supports
for people with severe mental disorders
whenever their needs exceed the capacities
of existing primary/general health services.
Such problems require either (a) referral
to specialised services if they exist, or
(b) initiation of longer-term training and
supervision of primary/general health care
providers. Although specialised services are
needed only for a small percentage of the
population, in most large emergencies this
group amounts to thousands of individuals.”

This layer includes all psychological
supports focusing on the individual,
conceived by expert Faro psychologists,
as well as middle/long-term assistance
of users and the referral to territorial
services for vulnerable cases.

26 All psychological adaptive mechanisms used by an individual
to cope with potentially stressful or dangerous situations to
the mental psychic functioning and the overall psycho-physical
well being.

14
### PORTS MOST AFFECTED BY LANDINGS

*from 01/01/2016 to 15/12/2016 (excluded migrants tracked down on land)*

<table>
<thead>
<tr>
<th>Port</th>
<th>Landings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Augusta</td>
<td>25,287</td>
</tr>
<tr>
<td>Pozzallo</td>
<td>19,122</td>
</tr>
<tr>
<td>Catania</td>
<td>17,982</td>
</tr>
<tr>
<td>Messina</td>
<td>15,188</td>
</tr>
<tr>
<td>Reggio Calabria</td>
<td>15,012</td>
</tr>
<tr>
<td>Palermo</td>
<td>14,829</td>
</tr>
<tr>
<td>Trapani</td>
<td>14,115</td>
</tr>
<tr>
<td>Lampedusa</td>
<td>11,399</td>
</tr>
<tr>
<td>Cagliari</td>
<td>7,541</td>
</tr>
<tr>
<td>Crotone</td>
<td>7,126</td>
</tr>
<tr>
<td>Taranto</td>
<td>6,770</td>
</tr>
<tr>
<td>Salerno</td>
<td>5,402</td>
</tr>
<tr>
<td>Catania</td>
<td>4,037</td>
</tr>
<tr>
<td>Capo Vaticano</td>
<td>3,567</td>
</tr>
<tr>
<td>Porto Empedocle</td>
<td>3,119</td>
</tr>
<tr>
<td>Naples</td>
<td>469</td>
</tr>
</tbody>
</table>

The Faro project is involved in every first reception setting:

- **Landing ports** of Pozzallo (Ragusa) and of Augusta\(^2\) (Syracuse), which are the two main ports, where the majority of migrants land (see graph below)

- **Hotspot** of Pozzallo

- **First Reception Centres** located in three different cities in the Ragusa, Syracuse and Catania provinces.

In the timeframe referred to in the graph, the two ports where Terre des Hommes worked received in total 44,409 migrants. During 2016, Faro has assisted 40 landings in Pozzallo and, only in the semester from June to December, 39 landings in Augusta, since it worked in this port with a dedicated team for six months.

Notwithstanding the variety of places where Faro works, its cultural approach to the theme of migration and migrant, the relationship with territorial authorities and the specific work techniques with migrants implemented by various team members have such an uniform nature that interventions are always homogeneous, with at the same time a diversified approach according to each specific situation. This also goes to show how flexible the Faro project is. Thanks to these characteristics (homogeneity and flexibility), it is possible to present the three main experiences of Terre des Hommes in Sicily for minors and families together.

For this reason, we will describe the situation following this sequence:

1. **DOCK IN THE LANDING PORT**
2. **HOTSPOT**
3. **FIRST RECEPTION CENTRES**

This reflects the sequence of services offered by our reception system to migrants. This process is also reflected in the operations of Terre des Hommes which implements different interventions according to emerging needs.

\(^2\) The project on the dock of the Augusta port lasted six months (June - December 2016), while redacting this document, Terre des Hommes is raising the needed funds to re-launch the project.

**Porte più colpite dalle imbarcazioni**

*da 01/01/2016 a 15/12/2016 (esclusi i migranti tracciati in terra)*

<table>
<thead>
<tr>
<th>Port</th>
<th>Imbarcazioni</th>
</tr>
</thead>
<tbody>
<tr>
<td>Augusta</td>
<td>25,287</td>
</tr>
<tr>
<td>Pozzallo</td>
<td>19,122</td>
</tr>
<tr>
<td>Catania</td>
<td>17,982</td>
</tr>
<tr>
<td>Messina</td>
<td>15,188</td>
</tr>
<tr>
<td>Reggio Calabria</td>
<td>15,012</td>
</tr>
<tr>
<td>Palermo</td>
<td>14,829</td>
</tr>
<tr>
<td>Trapani</td>
<td>14,115</td>
</tr>
<tr>
<td>Lampedusa</td>
<td>11,399</td>
</tr>
<tr>
<td>Cagliari</td>
<td>7,541</td>
</tr>
<tr>
<td>Crotone</td>
<td>7,126</td>
</tr>
<tr>
<td>Taranto</td>
<td>6,770</td>
</tr>
<tr>
<td>Salerno</td>
<td>5,402</td>
</tr>
<tr>
<td>Catania</td>
<td>4,037</td>
</tr>
<tr>
<td>Capo Vaticano</td>
<td>3,567</td>
</tr>
<tr>
<td>Porto Empedocle</td>
<td>3,119</td>
</tr>
<tr>
<td>Napoli</td>
<td>469</td>
</tr>
</tbody>
</table>

Il progetto Faro è coinvolto in ogni primo imbarco:**

- **Porti d’imbarco** di Pozzallo (Ragusa) e di Augusta\(^2\) (Syracuse), che sono i due principali porti, dove la maggioranza dei migranti sbarca (v. grafico sottostante)

- **Hotspot** di Pozzallo

- **Centri di Ricevimento** situati in tre città differenti nella provincia di Ragusa, Syracuse e Catania.

Nel periodo di riferimento il progetto Terre des Hommes ha lavorato in totale 44.409 migranti. Durante l’anno 2016, Faro ha assistito 40 imbarcazioni in Pozzallo e, solo nel semestre di giugno a dicembre, 39 imbarcazioni in Augusta, poiché ha operato in questo porto con un team dedicato per sei mesi.

Nonostante la diversità di luoghi nei quali Faro opera, la sua prospettiva culturale del tema della migrazione e del migrante, la relazione con le autorità territoriali e le specifiche tecniche di lavoro con i migranti implementate da vari membri del team hanno caratteristiche uniformi, con allo stesso tempo una prospettiva diversificata in base a ciascuna situazione specifica. Questo va a mostrare come il progetto Faro sia estremamente flessibile.

Grazie a queste caratteristiche (uniformità e flessibilità), è possibile presentare le tre esperienze principali di Terre des Hommes in Sicilia per minori e famiglie insieme.

Per questo motivo, descriveremo la situazione seguendo questo ordinamento:

1. **DOCK IN THE LANDING PORT**
2. **HOTSPOT**
3. **FIRST RECEPTION CENTRES**

Questo riflette la sequenza di servizi offerti dal nostro sistema di ricevimento ai migranti. Questo processo è anche riflettore nelle operazioni di Terre des Hommes che implementa diverse interventi in base alle emergenze di necessità.
Docks in ports of landing

Landing Procedures and reception system

Landings are more or less carried out similarly in all ports. Reception systems arranged in each landing port, however, differ according to geographical context, to the type and expected delay for identification procedures and for the transfer to different types of centres, to non-institutional involved actors. In Palermo, Catania, Trapani and Crotone migrants are transferred to first reception facilities right after the medical triage and pre-identification. However, new directives on identification procedures made the delays longer and more extenuating even in those centres. As we will see in detail, in Pozzallo migrants are transferred to the nearby Hotspot right after the medical triage.

Dock of the Augusta Port

Augusta is the only landing port in which a detention centre has been set up. This centre works similarly to a Hotspot, where migrants and in particular UFMs with children, are accommodated in two big UFMs, wait for a long time, some times even weeks, to be transferred to a First Reception Centre.

Migrants are accommodated in two big tensile structures (for a maximum of 400 bunks) and some tents (for a maximum of 15 bunks each).

In the same area other services are found: Syracuse Provincial Health Authority (ASP), Emergency, Regional Civil Protection (responsible for the logistics), Municipal Civil Protection (for meals and essential goods), Immigration Bureau of the Syracuse Police Headquarter and Forensic Police, as well as two shipping containers of Frontex and the Red Cross.

Landings are carried out in the presence of several actors responsible for senting safety authorities as well as humanitarian rescue authorities.

The first health screening is already carried out on the boat by the US-MAP (Office of Sea, Air and Border Health Control) doctors who send emergency cases to local hospitals or to Emergency. Then, informal inquires are performed by Public Prosecution Office workers to detect potential “traffic-finders”. Before the medical triage, migrants are given water and slippers; after the triage, they walk to the camp and are pre-identified there, a procedure in which families with children and women are prioritised.

Minors, since they have not been identified as such yet, wait together with adults.

The identification procedure itself represents, at least until today, the first element of risk for their protection, because the age determination assessment is based on a non-scientific method carried out by the Police Immigration Bureau or Frontex or, when possible, with the aid of designated ONG workers.

Identified UFMs are then transferred to designated tents and are separated from adults, as long as the centre is not overcrowded.

In this difficult situation, the Terre des Homme team, made up of a psychologist and a cultural mediator, operates since the very first stages of landing to observe and detect needs and difficulties of minors and families, also through the useful information exchange with other organisations present there. Unlike the case of Pozzallo, the team here did not intervene in the medical triage, managed by the Provincial Health Authority and the Red Cross.

A second operation of monitoring was carried out by Terre des Hommes immediately after landing, in the tents of UFMs and families with children. The team remained to work there even in the days following the landings, until UFMs were transferred into First Reception Centres.

The activities performed by our team are:

- observation and monitoring of UFMs and families with children to detect psychological and psychosocial needs
- individual psychological support for UFMs and members of families with children
- report of potential detected vulnerable cases to competent authorities
- report of healthcare cases to ASP staff working on the dock
- report of relevant cases to other authorities and organisations working on the dock
- reception and orientation of families with children
- group reception and orientation of UFMs
- group activities for UFMs with the purpose of triggering individual and social resilience
- mediation and integration interventions between different actors working on the dock and the project target group.

The majority of incoming minors are healthy individuals, experiencing normal reactions to an abnormal situation and/or to critical events preceding the landing.

Therefore, Terre des Hommes’ action aims at preserving and enhancing their normality, even in extreme situations, rather than healing a pathological state.

The objective is to help people reduce the impact of critical events, retain or recover their usual social-psychological functioning, and avoid long-term consequences coming from a continuous exposure to stressful situations upon arrival.

The latter often overshadow the expression of other needs, thus hindering past traumatic or potentially traumatic experiences. This is why people rarely manifest unease or the need of help due to past experiences during their stay at the port, given the fact that their psychic resources are trying to face new and current problems.

The lack of a national policy distributing minor evenly on the territory forces young migrants to stay longer at the port, exposing them to dangers to their physical and psychosocial integrity. Furthermore, already strained local services are forced to seek solutions to a phenomenon which has become unmanageable, leading to the setting up of places which are often not suitable to the reception of this target. In the near future, it will become clear if the Zampa law will finally be able to unblock this situation.

Minors might stay at the port as long as several weeks; in July 2016 a peak of 21 days was recorded.

More in details, in Augusta Terre des Hommes detected some potentially stressful situation:

- impossibility to contact by phone families in the country of origin
- inadequate response to basic needs (nutrition, personal hygiene, protection from weather)
- impossibility to receive secondary medical care

Lack of coordination among operators working on dock

Notwithstanding the diligence generally shown by all and family operators present on dock, Terre des Hommes detected a certain lack of movement and sharing of information, as well as an excessive fragmentation of interventions, leading to some dysfunctions of the reception system, particularly evident in the case of big landings (up to 2,000 people per week).

Other stressful situations include:

- difficulty to gain access to a second operation of monitor
- impossibility to receive secondary medical care
- exposure to adverse weather in precarious housing conditions
- impossibility to receive secondary medical care

Intervention

During the first stages of landing, the Faro team observes and carries out a first description of needs and difficulties, creating a first mental map of the specific needed intervention: prevalent nationalities, spoken languages, number of UFMs and families with children, general psycho-physical conditions, prevailing emotional situation.

Right after the transfer of migrants from the dock to the centre, the team performs a first recognition in the encampments in order to establish a first contact with the target group, prioritising families with children, if there are any, and especially women alone with their children; otherwise, directly to UFMs.

The team always uses extreme discretion while in the tents and is not invasive. Usually, people are so exhausted by the journey that they only wish to rest, but mothers must meet the needs of their children, especially if they are newborns or toddlers, and need to understand how the camp works, whom they have to ask to get water, food and blankets.

Therefore, migrants are often the first to get in touch, in order to receive clear
LEVEL OF NEEDS OF BASIC SERVICES AND SAFETY

Psychosocial well-being must be protected; it starts from the re-establishment of the sense of safety to the provision of services which can meet basic physical needs (food, shelter, water, healthcare, etc.).

In this level, Terre des Hommes’ activity is intertwined with that of other involved actors, responsible for those services. It regards both strictly health-care issues and those issues related to logistics and organisation and always requires an exchange with other actors working towards different goals, such as safety.

Therefore, the team works to facilitate communication between these actors and between them and migrants, so that everyone’s activity can be based on the respect of people’s dignity and integrity, support their mental health and psychosocial well-being, as well as document the impact that accessing these basic services might have on psychic health and psychosocial wellbeing. In effect, it is important to highlight the note-worthy difference between basic services for the treatment of bodies or for the care of the individual.

The first one, unlike the latter, does not include a recognition of any political determination and social and cultural belonging and thus any participation or possibility to choose.

LEVEL OF SUPPORT TO FAMILIES AND COMMUNITIES OF BELONGING

It is important to safeguard family and community ties in order to protect psychic health.

In this level, Terre des Hommes must take into account the particular current circumstances, where these ties, especially in the case of UFM, were more or less dismantled by the physical and psychological act of emigrating and the understanding of difficulties and/or specific needs, always represents a way in which the team can show availability and establish a relationship based on trust. As a matter of fact, albeit it may seem banal, it communicates a certain recognition of the other as a person, which is absolutely not granted for migrants given their preceding experiences and current settings.

Being active in the intervention settings, become visible, actively seeking a contact: this is all very important. As a matter of fact, although sometimes it turns to parents to support and assess events according to adults’ perception, each time that there is a separation or the landing that members of the same family are separated and arrive in different ports of landing. This can happen due to health emergencies (e.g. a family member is taken with an helicopter rescue service and brought into the nearest hospital) or by mistake (members of the same families are rescued by different boats, etc.). In these cases, Terre des Hommes closely collaborates with those organisations focusing their work especially on family reunification, such as the Red Cross with the RFL service (Restoring Family Link), reporting individual cases during the recognition and monitoring activities.

Other separations after landing are due to emergency treatment in the hospital and/or hospitalisation of a family member: this can happen to newborns, hospitalised even during several days, and to their mothers. Sometimes mothers are hospitalised while children remain at the port, if it is expected that the mother will return during that same day (otherwise the custody of children is temporarily given to a community).

In this case, Terre des Hommes offers emotional support to family members at the dock and, together with the ASP staff, contacts the hospitals to receive information about hospitalised family members. In the case of children left alone at the port, after having verified that there is no other adult of the national group of belonging taking care of the child, and after having reported it to the Bureau of Immigration personnel and other relevant actors, Terre des Hommes provides a protected place in its gazebo, taking care of the child’s emotional support and, together with the Civil Protection volunteers, taking care of his/her material needs.

Other separations concern extended families, once the moments of the transfer arrives. In this case, whenever possible, Terre des Hommes provides information or about the respective destination centres and their addresses.

Whenever this occurs, the team has to be very precautious with unaccompanied minors, especially in the case of girls.

When families with children are involved, the interventions aim at mobilising the internal resources of the family as support for all its members. Reference adults act as the thermometer of children emotions, namely children assess events according to adults’ reactions and their capacity to offer an adequate interpretation of the situation. That is why Terre des Hommes turns to parents to support and assess their competences, and at the same time it never replaces their role. As a consequence, each time that there is a communication and/or interaction with children, parents’ permission and their collaboration in the proposed playing activities are required.

Terre des Hommes uses playing as the main tool of operation with children from two to twelve years old. Playing fulfils different functions:

- It puts children back in a situation of normality (playing for them is a routine activity)
- It creates a framework separating order (of the game) from chaos (coming from outside)
- It offers a medium of emotional expression and decompression
- It offers the possibility to see family ties under a playful light once again.

The Playground, set up inside the Terre des Hommes gazebo or outside, offers simple and not very structured activities: drawing, clay manipulation, singing, etc. for one or more families involved, the interventions aim to mobilise following procedures required by the landing system, playing activities are carried out without reference adults. Lastly, in other occasions, the team arranges with parents to have the latter managing playing activities and relevant materials, if the team is already busy with individual cases.
LEVEL OF NON-SPECIALISED INDIVIDUAL AND GROUP SUPPORT

In this level, Terre des Hommes uses an approach based on the principles and techniques of psychological first aid24. It includes specific actions aiming at facilitating the process of meaning-making and regaining the sense of control on his/her own existence:

» To inform and orient
» To be there
» To listen

The abovementioned actions are not pre-arranged or linear; on the contrary, they are part of circular processes of interaction requiring the worker to listen and analyse the issue.

TO INFORM AND ORIENT

The majority of people facing critical situations need first of all to give a meaning to what is happening, to maintain a proper social and psychological functioning, which is impossible without key information and orientation.

The team provides, both in an individual manner and in groups, information and orientation about the logistical organisation of the camp, the role of different actors, the purpose of some procedures, the waiting time, the operation of the reception system, the geographical relations, etc.

In these cases, it is very important to be honest about what one knows and does not know, not to give false hope, e.g. about the rapidity of transfers, and not to nourish the idea that all problems can be solved here.

Other pieces of information concern normal reactions to stressful situations and how to face them. People, and children in particular, can be afraid or worried about their own reactions and in these cases, it is important to reassure them that these are normal and temporary behaviours.

Reception, information and orientation groups for UFM.

These groups are jointly organised by the Terre des Hommes team and are carried out following a structured sequence in all settings, which includes the introduction of the organisation and the Faro Project, the introduction of professionals working on the docks, information and orientation regarding the stay in the camp and the reception system, listening and sharing minors’ expectations and worries, and a final recapitulation with possibility to ask questions. Minors from the same linguistic area (English speaking, French speaking and Arabic speaking) take part in the same group and the duration varies according to the number of participants and the extent of their involvement.

TO BE THERE

The majority of landed migrants - minors included, do not want to talk about their suffering and the traumas they had to endure in the country of origin or during the journey. It is normal and during this stage of adaptation, it is a way to defend oneself against psychological pain. Getting in touch with one’s painful emotional experiences can lead to a breakdown in a still too chaotic and unsure setting, which would require the involvement and activation of all psychic resources.

The psychosocial worker himself/herself has different priorities, given, amongst other reasons, the duration of stay at the port, which - albeit unsure, is short in any case and does not allow a complete treatment. According to the famous principle “do not cause damage”, it is considered as extremely risky to open wounds that one cannot repair and, thus, no pressure whatsoever must be put on people to induce them to talk about their suffering.

On the contrary, the majority of arriving migrants, and even more so in the case of minors, appreciate and seem to benefit from a discreet, attentive, and empathic presence.

After countless days of stay at the port, UFMs find themselves alone, after that all adults have been transferred, with only few workers left (law-enforcement authorities and, during meals, the volunteers of the Civil Protection). These are the hardest days for them, which never pass by and yield to bad thoughts. It is especially in this situation that the Terre des Hommes intervention is simply about… being there. The presence of the team, sitting in silence next to the minor, seems to represent an emotional support just for the fact that it expresses a form of closeness, empathy, an acknowledged affection.

During these longer stays, many minors wish to be involved in recreational and/or educational activities, thus showing that they are luckily full of resources. In order to mobilise and enhance such resources, Terre des Hommes provides:

» Workshops to learn the Italian language;
» Informal groups of discussion;
» Play activities.

TO LISTEN

Obviously, migrants have a story that goes beyond endured suffering and traumas; they have much more to tell and sometimes wish to do so. Keeping in mind one’s biography, the sense of one’s continuity is an important resilience factor in a setting consisting on cutting bridges between life before and after crossing the sea and bureaucratically redefining one’s identity. Furthermore, reconnecting with one’s biography allows to project oneself in the future and nurture some hope, which are important resources to face the current situation. Hence, the psychosocial worker must be always ready to listen to these stories, to support them, enhance them and help people turn them into resources.

In this level, given the characteristics of the settings and the short duration of stay, Terre des Hommes works to detect potential vulnerabilities and report them to competent services, so that they can take care of these cases. Furthermore, it helps rescuing people showing acute reactions to endured stress conditions, also assessing whether it is necessary to transfer them into another location and to entrust them to other services, whenever the treatment activity requires individuals to stay longer in a facility which is more equipped for their treatment.

For what concerns vulnerabilities, in the case of families or UFMs, the work of recognition and monitoring carried out in the preceding levels, is fundamental. Through informal contacts and group activities, it is possible to detect signals of unease, which are more likely to evolve in pathologies. The most frequent ones are asthenia, anxiety, social withdrawal, and mood deflection.

After these first contacts, it is not rare that involved people spontaneously ask for an individual support meeting. They think that sharing their worries and pain can benefit them. The purpose of the meeting is mainly to listen to and contain emotional experiences linked to their life events. Sometimes people especially request to continue this aid relationship; the worker can only satisfy their request by referring them to other services and other workers.

Therefore, it is important to satisfy their request to be listened to and define straightforward the limits and possibilities of one’s intervention.

After the meeting, the psychologist of Terre des Hommes reports the case, if necessary, both to the Provincial Health Authority and the Municipal Social Services, also with the purpose of soliciting a fast transfer of the relevant person in a facility capable of providing an adequate psychological or psychiatric support and meet the individual’s need for protection.

Another type of intervention aims at achieving the emotional stabilisation of people showing acute anxious reactions to stress, which could appear in the form of tremors, palpitations, breathing problems, nausea, or dissociative reactions which could appear as state of confusion, delirium, self-damaging behaviours, following a new stressful event occurred during the stay at the port, such as a separation.

THE DOCK AT THE POZZALLO PORT

As mentioned above, migrants landing at Pozzallo are transferred into the nearby Hotspot immediately after the medical triage and some of the UFMVs are placed in a First Reception Centre, where the team of Terre des Hommes works.

This team can hence follow migrants during the two first steps of the reception process (landing and Hotspot) and in the case of some minors, the team can also continue its activity in the following reception facility.

This condition, albeit limited in time, seems to facilitate the support intervention; as a matter of fact, whenever beneficiaries are followed by Terre des Hommes along the whole step of first reception, from their arrival until their stay in the CPA (First Reception Centre), they can benefit from a relationship based on trust and mutual familiarity which has already consolidated over time; moreover, their psychological and psychosocial documents are transmitted, as proof of the work performed by the team during preceding steps (e.g. vulnerability reports and psychological observations, competence assessment, evaluation of linguistic competences).

Even on the dock at the Pozzallo port, the team intervention depends on the specific features of the settings where it operates, and, in order to be carried out conscientiously, requires a deep understanding of the environment (how it is structured, what its functions are, who its actors are etc.). Furthermore, it also requires a knowledge of the relevant migratory phenomenon, as well as of the regulatory framework and the relevant Italian and European policies.

Fulfilling the Faro mandate inside a context such as the dock is indeed different than working in a Hotspot or in a First Reception Centre.

Pursuant to the IASC guidelines, the team adapts its mandate according to each situation, to meet the basic needs of its target groups while promoting their mental health and psychosocial well-being and supporting their autonomy and individual, family and community resources, while always collaborating with other involved actors.

In this paragraph we simply wish to describe the interventions in the landing dock.\(^{15}\)

As required by the SOP (Standard Operating Procedures), the Pozzallo Hotspot is located right beside the dock. A first health screening is carried out on the rescue boat by medical staff in agreement with the Office of Sea, Air and Border Health Control (USMAF), at times collaborating with other NGOs, to rapidly verify whether any contagious diseases are detectable. Afterwards, at the Hotspot, migrants receive their first specific treatment.

During this step, the Terre des Hommes team reckons that detecting psychological vulnerabilities already on rescue boats and communicating them to the mainland - e.g. by the MSF boats, is a successful practice which facilitates the following treatment of people with specific needs.

As the medical triage, a second level of healthcare is carried out for those people with specific medical problems (hyperthermia, chemical burns due to contact with petrol, hypoglycaemic crises followed by fainting, gunshot wound, ankylosis, wounds due to draws on the boat, fractures and contusions, other medical specific diseases). On a third level, pregnant women and some individuals with specific health problems are immediately transferred from the triage to the province hospitals.

The logistical and operational continuity between the landing dock in Pozzallo and the Hotspot is the main specific feature differentiating this port from the others.\(^{16}\) The triage is hence the main activity carried out by the team of Terre des Hommes at the dock.

The intervention involves a psychologist and a linguistic cultural mediator\(^{26}\) and includes a first screening of migrants conditions. Terre des Hommes works together with the Provincial Health Authority and other NGOs, sharing healthcare information emerged during the psychological screening and facilitating the communication about consequent healthcare steps awaiting the migrant, thus supporting his/her empowerment.

During this step the mediator embodies a cultural otherness allowing to immediately create a sense of closeness with landing migrants, reassuring them with both non-verbal and verbal communication.

Furthermore, using the mother tongue facilitates the communication with the psychologist in order to identify specific needs. The mediator plays a key role in understanding cultural codes, which helps to rapidly build a relationship based on trust with the whole team of Terre des Hommes, even during the next steps of the treatment.

The purpose of the triage is to detect psychological vulnerabilities of beneficiaries in order to ensure during following steps (Hotspot and other CPAs) a continuity of psychosocial support and psychological intervention, if necessary. Furthermore, the intervention lays the foundation for a relationship based on trust with the migrant and promotes a circular communication and the transmission of information between them and other actors responsible for treatment (Healthcare Authorities, Red Cross, Civil Protection, other NGOs).

Along with the triage activity, the sociologist monitors and registers the landing procedures and the satisfaction of the basic needs of migrants, providing the team with a general picture during a following phase. On the dock, together with SOPs, a first identification is carried out taking pictures and giving them a demographic bracelet; during the transfer to the Hotspot a first information round on UNHCR international protection is provided, which is subsequently completed, while the IOM (International Organisation for Migration) is responsible for trafficking and the Assisted Voluntary Return.

MENTAL AND PSYCHOSOCIAL HEALTH INTERVENTION AT THE TRIAGE

Along with the triage activity, the sociologist monitors and registers the landing procedures and the satisfaction of the basic needs of migrants, providing the team with a general picture during a following phase. On the dock, together with SOPs, a first identification is carried out taking pictures and giving them a demographic bracelet; during the transfer to the Hotspot a first information round on UNHCR international protection is provided, which is subsequently completed, while the IOM (International Organisation for Migration) is responsible for trafficking and the Assisted Voluntary Return.

The logistical and operational continuity between the landing dock in Pozzallo and the Hotspot is the main specific feature differentiating this port from the others.\(^{16}\) The triage is hence the main activity carried out by the team of Terre des Hommes at the dock.

The intervention involves a psychologist and a linguistic cultural mediator\(^{26}\) and includes a first screening of migrants conditions. Terre des Hommes works together with the Provincial Health Authority and other NGOs, sharing healthcare information emerged during the psychological screening and facilitating the communication about consequent healthcare steps awaiting the migrant, thus supporting his/her empowerment.

During this step the mediator embodies a cultural otherness allowing to immediately create a sense of closeness with landing migrants, reassuring them with both non-verbal and verbal communication.

Furthermore, using the mother tongue facilitates the communication with the psychologist in order to identify specific needs. The mediator plays a key role in understanding cultural codes, which helps to rapidly build a relationship based on trust with the whole team of Terre des Hommes, even during the next steps of the treatment.

The purpose of the triage is to detect psychological vulnerabilities of beneficiaries in order to ensure during following steps (Hotspot and other CPAs) a continuity of psychosocial support and psychological intervention, if necessary. Furthermore, the intervention lays the foundation for a relationship based on trust with the migrant and promotes a circular communication and the transmission of information between them and other actors responsible for treatment (Hea...
POZZALLO HOTSPOT

The European Agenda on Migration of the European Commission (May 2015) communicates the creation of “Hotspots”: facilities dedicated to the fast identification of migrants who have just landed, and to the selection between those who have the right to remain in Italy and those who don’t.

These facilities17, however, are frowned upon by various organisations, including Terre des Hommes which has been demanding for a long time to avoid the transit of UFMs and children in the Hotspots, considering the possibility of carrying out identification procedures within the Reception centres designated for minors. This is because these facilities cause damages and entail risks to their guests, especially in the case of more fragile people, like children and teenagers. Amongst many detected problems gradually reported to the authorities, it is worth mentioning:

» A high risk for the youngest, forced to share the same space with unknown adults in precarious hygienic and healthcare conditions and in a tense environment

» Constant presence of children in the “big room of adults”

» Risk for female UFMs (often already more fragile people, like children and teenagers) being in precarious hygiene and healthcare conditions and in a tense environment

» Prolonged stay of UFMs (even more than 1 month)

» Precarious hygienic and healthcare conditions during big landings

» Lack of supply of basic services and necessities to young children and UFMs by the managing body (e.g. supply of inadequate clothing for season or age, lack of milk specific for newborns, until last month lack of hot water in the showers)

» Extreme difficulty to communicate with family members (there is only one phone)

» Lack of mediators in the ASP medical-nursing clinic

» Impossibility to apply for asylum in the Hotspot

» No official legal recognition of the Hotspot facility

» Limitation of personal freedom of migrants, given the lack of disposability from the judicial authority (particularly sensitive subject for UFMs).

The Pozzallo Hotspot was created in January 2016. Its capacity is 180 places, which would reach roughly 250 after the currently underway extension of the facility; migrants should be transferred from this facility within a maximum of 72 hours; at least until today, this rarely happens.

The Hotspot is made up of a big central space with bunk beds and one lateral room, reserved for vulnerable categories (families, women, male and female UFMs, etc.). There is a small kitchen and 5 toilets. In the middle there is a ASP module to make his/her request for asylum official.

The activities focus on children from 0 to 11 years old and on UFMs from 12 to 17 years old, paying attention especially to female UFMs, potential victims of trafficking or gender violence, to pregnant women and families. First of all, the team works to trace beneficiaries down, who have been identified with an alphanumeric reference; this is an operation which, giving the frequent overcrowding and promiscuity, requires time. Then, personal data of participants are recorded (name, surname, country of origin, country of boarding and age), so as to organise interventions depending also on common languages (Arabic, English, French).

The interventions are modulated according to the specific characteristics of the settings and the beneficiaries’ basic needs which arise gradually. Using the IASC guidelines as reference, the main needs of the beneficiaries in the Hotspots are the following ones:

» physical and safety needs (food, water, rest, shelter, basic healthcare and hygienic assistance, including communicable diseases tests)

» emotional needs (experiences of the journey, current situation and migration project)

» cognitive needs (linguistic and geographical orientation)

» social needs (social inclusion and network development)

» spiritual needs (need to pray and respect religious precepts inside the facility, fasting, prohibited food, clothing, etc.)

27 In Italy the Hotspots of Lampedusa, Pozzallo, Palermo and Trapani are operational. However, according to the Ministry of the Interior, they are not equipped and, together with the other facilities, are used by Frontex, the police flying squad, and the managing body.

28 The following structural interventions are worth mentioning: new wing for UFMs with 50 places, shipping container for children, expansion of sanitation and hygiene conditions during big landings.
In this case too, activities are structured according to the 4 levels of the IASC “Pyramid for mental health and psychosocial support” and can be defined (from base to top) as:

**LEVEL 1 BASIC SERVICES AND SECURITY**

Activity carried out by the whole team to detect the basic needs of beneficiaries and how they are met by the managing body and the medical staff47. Terre des Hommes communicates with them to report potential physiological medical needs, seeing that an ASP clinic is present. The team also verifies that basic needs of safety and protection are met, such as being able to get in touch with family members after the dangerous migration journey.

Objectives:
- Promoting the response to physiological, safety and protection basic needs of beneficiaries in order to reduce the level of anguish and support the agency personnel.

**LEVEL 2 COMMUNITY AND FAMILY SUPPORT**

This level includes all interventions directed to all beneficiaries of the reference target to facilitate the access to community and family basic support services. As a matter of fact, during the journey, in the research and rescue activities at sea (S.A.R.- Search and Rescue) and once arrived in the Hotspot, there is a high risk of destructing community and family ties of migrants, due to loss, displacement and separa-

tion of families.

Hereafter, 5 interventions are described.

2.1 Reception with monitoring of specific psychological needs

Reception is addressed to: families, pregnant women, UFM - groups focused on female UFM, with the aim of facilitating the detection of specific needs (potential victims of trafficking, violence, Female Genital Mutilation and early marriage48). The activity can be carried out both in an individual manner and in group, and includes the introduction of the Faro project to beneficiaries, and the introduction of the team with the workers’ respective roles, as well as the psychosocial activities to be performed in the forthcoming days.

The Terre des Hommes Kit is given and users are invited to approach the learning of the Italian language in order to facilitate the start of what will be a long integration process. A first geographical orientation is then carried out with the help of the phrasebook, showing on the map the place of landing; afterwards, the benefici- ciaries’ psychophysical health conditions are checked and they are informed that a service of individual psychological support is available. This service is explained in detail to the users, also thanks to linguistic and cultural mediators, in order to reassure them about potential cultural barriers which could hinder their access to the psycho-

cological service, and making specific needs arise. Family and community networks of beneficiaries are mapped out and building new friendship ties is encouraged. If necessary, an assistance is provided by competent actors in order to get in touch with previously landed or separated family members. For specific needs of international or legal needs, the UNHCR and other competent NGOs reports can be consulted. Terre des Hommes also collaborates with them to report individual cases. In these groups, a first moment is dedi-

cated to listening and answering minors’ questions/requests. The Reception activity is an introduction to all other activities.

Objectives:
- Getting to know minors and building the basis of a relationship based on trust; providing a first orientation to the

settings and giving participants a tool to learn the Italian language in order to be able to interact with others afterwards. Detecting specific psychological needs which will be assessed in more details afterwards. Monitoring children’s conditions within families and communities, supporting parents, where possible. The Reception activity faces some obstacles in the case of specific national groups, such as Somali and Eritrean who are often reluctant to give fingerprints and at first do not trust the team, given the fact that they ignore their specific humanitar-

ian mandate. Furthermore, another objective is to prevent family breaking up, as co-referents explain the community ties and support new ones amongst beneficiaries. This helps maintain the psychological and psycho-

social well-being of the latter, starting from the existing family and community resources.

2.2 Detection of specific psychological needs

Specific psychological needs are detected both during the Reception activity and through informal observation dynamics between UFM and other beneficiaries upon their arrival at the Hotspot, as well as through the observation of individual vulnerabilities. Potential beneficiaries of psy-

chological support are also reported to the colleague sociologist of Terre des Hommes, (if they are detected during other psycho-

social activities. This activity is performed by monitoring individual and socio-relational variables. The first includes basic needs (nutrition, sleep, etc.), self-care (personal hygiene, cloth-

ing, etc.), behaviour (self-damaging acts and acts damaging others, isolation, etc.) and potential symptoms of psychological discomfort. On the contrary, detecting socio-relational variables relates to the observation of the functioning of individu-

als, families, communities within the social settings of the Hotspot, focusing especially on group dynamics.

Objectives:
- Detecting specific psychological needs in order to develop a subsequent specialised treatment which could be carried out in groups, with the family or individually.

2.3 Literacy courses in the Italian language and linguistic desk

Lessons are planned by the sociologist based on the immediate communication need of the migrant; for this reason, the proposed linguistic inputs consider the com-

munication settings in which the migrant will use his/her second language49. In the specific case of Hotspots, the lessons are based on a “survival” Italian and the ap-

plied methodology takes into consideration the fact that the language needs to be used straight away. The first elements of the Italian language are introduced, as well as the first lexicon for family, community ties and support new ones amongst beneficiaries. This helps maintain the psychological and psycho-

social well-being of the latter, starting from the existing family and community resources.

2.4 Recreational linguistic and integrated teaching method [Italian, geography, interculture]

This activity is conceived for small groups and can be directed to all minors, unaccompanied or not, from 11 to 17 years old, to pregnant women or parents. Usually, the tool of the geographical Puzzle (Italy or Europe) is used. Migrants have to put it together in a group and in the shortest time possible. Once completed, they take time to detect key places, city of landing, region, neigh-

bouring countries of Italy, etc. At times, an orientation on the African continent and the position of the Countries, with their bor-

ders, is carried out, focusing on the coun-

tries of origin of the participants. During the making of the puzzle, the sociologist monitors group dynamics, checks whether participants tend to play by themselves and boosts them to collaborate and share the final result.

Objectives:
- Promoting participants interaction, team spirit and socialisation, improving cognitive skills, orientation to context and learning of new terms, especially from the geographical lexicon.

2.5 Geographical orientation and workshop

The geographical orientation activity is con-

ceived for small groups and can be directed to all minors, unaccompanied or not, from 11 to 17 years old, to pregnant women or parents. Usually, the tool of the geographical Puzzle (Italy or Europe) is used. Migrants have to put it together in a group and in the shortest time possible. Once completed, they take time to detect key places, city of landing, region, neigh-

bouring countries of Italy, etc. At times, an orientation on the African continent and the position of the Countries, with their bor-

ders, is carried out, focusing on the coun-
tries of origin of the participants. During the making of the puzzle, the sociologist monitors group dynamics, checks whether participants tend to play by themselves and boosts them to collaborate and share the final result.

Objectives:
- Promoting a holistic treatment of the individual and response to his/her specific needs, informing the individual about the services offered by various actors, facilitating integration and com-

munication.

3.2 Psychological support and expres-

sive groups

This activity is carried out by the psycholo-

gist of Terre des Hommes with the help of the linguistic and cultural mediator, if necessary. Participants can be maximum 10 and the activity is carried out both only verbally and by means of drawing.

> Psychological support groups using only verbal communication (focusing on the specific categories of vulnerable minors, such as for example survivors of ship-
trust, to provide a space where UFMs emerging during the end of the sharing of realities. The mediator facilitates the comprehension giving them the possibility to choose how they want to carry out the activity. The rule according to which there must be mutual respect and drawings of others should not be judged, is reiterated. At the end, the group gathers in a circle where participants are invited to tell the group about the meaning of their drawings/songs. During the activity, the psychologist observes how each minor approaches drawing, the group climate and monitors specific vulnerabilities which could arise through non-verbal behaviour and through the story of the drawing. When minors are asked to draw “a house”, at the end of the activity participants’ drawings can be united in order to create their current village. Afterwards, each minor explains what house he/she drew (in previous years of schooling. The assignment given among UFMs speaking different languages, so as to eradicate potential xenophobic behaviours.

3.3 Recreational creative workshop with psychological support

This activity is directed to families and children from 0 to 11 years old. Setting: the workshop lasts 2 hours more or less and lets participants explore the playing material and choose which recreational activity to do (free drawing, colouring pre-printed sheets, playing with modelling clay, projective storytelling through symbolic play with animals and puppets). The provided material includes blank sheets, pre-printed colouring sheets, colours of different kinds, modelling clay and shapes, puppets, animals, a ball and some games for babies. The mediator and the sociologist carry out recreational activities with children, either following what children spontaneously do or proposing new activities if participants struggle to start an activity autonomously. The sociologist observes how children socialise and the dynamics arising in the play group. The psychologist monitors vulnerabilities of participants through recreational activities and socialisation, observes the spontaneous relationships forming between them and their personal resources and promotes a first elaboration of experiences through symbolic play. When parents/grand-parents participate to the group, they are involved in the recreational activities with their children/grand-children.

Objectives:
- The purpose of verbal psychological groups is to help create a climate of trust, to provide a space where UFMs can be carefully listened to, while they tell about the sufferings endured in their country of origin/during the journey and in the current settings, detecting at the same time their requests. Groups using the means of drawing aim at facilitating free and creative expression of minors and providing them with a place to relax and unwind within the Hotspot after the difficult journeys. Both groups also share the purpose of fostering the creation and reinforcement of relationships among UFMs, as well as the establishment of group resources, and aim at detecting individual specific psychological needs. In mixed groups, a particular attention is given to fostering relationships among UFMs speaking different languages, so as to eradicate potential xenophobic behaviours.

LEVEL 4 SPECIALISED SERVICES

Psychological treatment includes a further specialised level (Specialised Services) for a limited number of beneficiaries whose suffering, albeit the assistance provided hitherto, is intolerable and can lead to difficulties in basic daily functioning. This consequent support is directed to people suffering from a serious psychological unease, who cannot find a solution to their needs with basic healthcare treatments.

Two types of interventions are included in this level:

4.1 Individual and family psychological support meetings

Meetings are managed by the psychologist of Terre des Hommes in French and English and for people using Arabic as only main language with the help of the linguistic and cultural mediation. Within the Hotspot the duration of these meetings varies from 45 minutes to one hour and a half. Treatment at the Hotspot includes an average of 1 to 2 meetings per person, given the high number of vulnerable migrants and their temporary stay. Furthermore, the main objective is always to promote their transfer to facilities which should be more adequate to treat this specific target. During these meetings, the psychological suffering manifested by the minor or the family is retraced, analysing the situation of the country of origin, of the migration journey and the current situation at the Hotspot. Current psychological and social conditions are then registered (observing the migrant’s symptomatology). The psychologist agrees with the minor or the child’s parents to write a report on vulnerability, which will be shared in the following days and sent to competent authorities, requesting to transmit it to target facilities. This activity particularly focuses on the detection of the resources of the minor family and on the analysis of their migration project, in order to support it. In the specific case of children, the support is provided in the form of recreational workshops, focusing on the previously mentioned psychological vulnerabilities; parents can also participate to these workshops. Psychological observations gathered during the activity are shared with parents and are part of the referral which is written subsequently. In cases where the family is more fragile, apart from the psychological activity, specific meetings with parents are carried out, both individually and together, to support their role as parents within the family.

Objectives:
- Examining more in detail clinical conditions of psychological suffering within the story of the individual/family and individual, community, and social available resources. Sending gathered information through referral, after having shared it with the beneficiaries, to competent authorities to request a continuity of psychological treatment.

4.2 Psychological referral

After the psychological meetings carried out with beneficiaries, a report on psychological vulnerability is written with the prior consent of the individual, attesting the story and the detected symptomatology of the migrant. The referral is shared with beneficiaries and then sent to competent authorities (Social Services, Healthcare providers, Public Procurement, etc.).
Chapter 4

First Reception Centres

The Terre des Hommes has been working in the last years in several first reception centres in various provinces: Ragusa, Syracuse, Catania, and Agrigento with two teams both composed of a psychologist, a mediator and an anthropologist/sociologist.

Operational Model

The Terre des Hommes operational model of intervention of psychosocial support uses the IASC Guidelines as reference also in its work in First Reception Centres. Actually, it is a model characterising the whole Faro project; it is composed of a series of processes aiming at increasing the protection and minimising risks through different actions for different targets, according to number and expressed unease. As a matter of fact, according to the guidelines, in emergency settings:

- only 10% of individuals show a symptomatology which could justify a therapeutic psychological or psychosocial intervention, necessary in the case of serious syndromes compatible with post-traumatic disorders, depression and other clinically relevant cases
- 30% of people can conveniently benefit from a psychosocial intervention, even of a community-based kind. These are cases in which a functional adaptation is still present, although it cannot be excluded that the situation would worsen with the manifestation of symptoms and troubles, as an adequate support from the family and/or reference community starts to waver (as is the case of UFM and more in general of those people who, by migrating, do not enjoy the material and emotional support of their networks anymore)
- the majority of individuals (60%) can experiment different forms of emotional stress, such as shock and reactions to loss, while keeping a good level of functioning, showing good resilience skills and demonstrating to be benefiting from activities aiming at bringing their lives back to normal and focusing on the development of the so-called “life skills”.

Starting from this reference framework and always keeping into consideration the peculiarities of this context, the target and its mandate, the Faro project adopts a flexible intervention model, including different stages in a cyclic pathway with objectives highly intertwined with one another.

Although Faro considers UFM and families with children its main target, it is aware of the fact that the personnel of the hosting facilities must be included as well, in order to ensure an approach that is really promoting well-being and protection.

Where requested, the team is thus available to assist managing bodies.

In the case of activities with CPAs, Terre des Hommes carries out regular collaboration meetings with the centre’s director and other workers (psychologist, legal assistant, educator, etc.), as well as real training courses on specific topics, as requested by the facility. Even if the collaboration meetings with the managing body aim at gathering and connecting functional information for a global care of the minor and more in general, of the user, these meetings can also bring out information and requests for advice on individual cases and training needs, to which the team can decide to give a more structured response.

To detect the needs of main beneficiaries, some moments are set aside in which users are actively stimulated to express requests and define the activities and interventions to be performed by the team, identifying together the problems affecting the group, to be able to organise meetings in which to discuss such problems.

Afterwards, a moment to jointly organise activities with the team is organised among all members of the team, according to what was observed in the preceding phase, organise the activities together to be carried out by one or all professionals of Terre des Hommes.

The activity planning is carried out over a period of some weeks. As a matter of fact, given the constantly changing conditions and the need to face an emergency situation, it is not possible to plan long term. The ability to adapt and be replicated are key features of interventions, since it is useful to continuously review activities, making the intervention flexible and really suitable to meet the needs of minors present here and now. This aspect is guaranteed by a constant analysis and examination of specific contexts and purposes. For example, at times a certain turnover in reference users is registered, but at the same time the opposite can happen, that is an extremely long stay in the centre of some beneficiary groups.

Because of this peculiarity, it is necessary and useful to create monitoring activities observing in a constant and continuous way every intervention phase, so as to find eventual important changes which would require a planning revision. A moment is designated at the end of the cycle of programmed activities. Right now, apart from asking for a group feedback on what was implemented together, it is also possible to carry out a more structured quality assessment about the interventions; this assessment is to be considered a useful “pre-text” to trigger participation and empowerment processes.

During this process it is fundamental to give back to involved people what they expressed: the participated assessment of activities, according to this methodology, includes two different meetings and allows a joint elaboration of the experience with Terre des Hommes.

When the team is carrying out this assessment process, it is clear that this final moment, unless it corresponds with the end of the activities of a centre, always marks the beginning of a new step of detection of needs, which is necessary to re-launch the intervention process in a participated and shared manner.

As already mentioned, in agreement
with the IASC model, Terre des Hommes identifies groups with different intervention needs and provides them with differentiated activities which will be described according to purpose and methodologies, while a whole paragraph will be devoted to the activities themselves. The first part of the following presentation that is dedicated to describe team interventions for individu- als who do not show signs of psychic unease, as preventative measures for migration are fundamental in the here and now; on the contrary, the second part will describe the psychological treatment interventions, reports of vul- nerability, and referrals to reference territorial services.

Chapter 4

Disengagement from the con-

text.

The purpose of the intervention is thus giving back a sense of spaciality and subjectivity in this climate of suspension and post-traumatic stress: helping to create an individual, but also collective response to the need of settling down as soon as possible to rebuild an orderly system and start a life project. Therefore, the objective is to provide “resilience” stones for the communitarian and individual resources using a methodology aiming at detect- ing the minors’ needs and urgencies in order to give them an orientation to the present and a project for the future. To fulfil these purposes, both free and semi-structured discussion places are created, which could make personal predispositions emerge and enhance the cultural and social heritage of the country of origin. The multidisciplinary team of the Faro project, as far as its professional competences go, has the objective of creating thinking and educa- tional tools to orient minors in this new setting and face the stress linked to journey memories, as well as their stay in places unuseful to meet their needs.

Besides what has been described hitherto, intervention must consider other relevant aspects:

Orientation:

Being locked up, physically and mentally, in this current setting after having experienced extreme events during the journey, makes migrants feel like they have not really “reached their destination” yet and can- not, but also passivity and apathy. To start building a life project in our country, it is essential that adoles- cents have the possibility to keep on about the Italian context beyond the limited and to a certain extent, narrow experience of the reception centre.

Disengagement from the con-
text:

With the purpose of meeting the need to plan one’s future life, it is essential to support the ability to escape from the limitations imposed by the current context, creating windows of understanding and inter- action with the social and cultural heritage of the Italian society. It is also necessary to discuss about the reception settings to re-elaborate and express those events marked by racism, discrimination and othering, often experienced from the very first contacts in the new country.

Usefulness in the short term:

In a provisory context which should last for only three months, it would be contradictory to adapt to a mis-
take of the system and create inter- ventions that are too structured on the long term, giving the impression that this delay is “normalised”, mak- ing minors settle in transitory set- tings. However, it is fundamental to give value to individual and collective daily time, building concrete tools to adapt and shake off the frustration coming from the lack of identity, faith, resources and planning possibility in a climate of general suspension.

Support to individual and group processes:

This intervention aims at working in an efficient way to eng- age individual and group resilience processes, restoring subjectivity in a depersonalising setting. The inter- cultural mediation is fundamental to acknowledge linguistic and cultural backgrounds of a diversi- fied user base.

Free choice:

It is the underlying value of inter- vention, but also a political tool. The freedom to decide whether to take part in the workshops offered by Terre des Hommes is essential to build a relationship with UFM’s. Mental health and their own journey and daily dynamics of the reception system leave little space to free will and free choice. They rather conform and mechanise even those moments which should be spontaneous, like meals. The freedom to decide whether to take part in activities offered by the CPA is thus a political tool of self-determination and recuperation of one’s own decision-making skill and subjectivity.

In the activities, an interactive, circular methodology based on workshops is pre- ferred, which can be developed involving the individual as a whole (manual activity, narrative, body, voice, playing, writing). One of the approaches interpreted in the centre methodology is “learning by doing”.

The activity is planned according to participative methodology: placing the minor at the centre of the intervention, always considering him/her as an active subject who can participate to the choice of objec- tives, if he/she is properly supported and listened to. Therefore, each type of activity is previously discussed in a group by these beneficiaries of the intervention, to trigger thinking and collective and individual choice process- es. For this reason, workshops become places where, besides satisfying educa- tional and informational needs, a space of belonging is created, where individual resources and personal preferences are en- hanced through a relationship based on care and void of judgements.

The implemented activities involve all three members of staff at different levels, who intervene according to their professional experience, through obser- vation and planning.

An essential work tool to deal with foreign minors is the linguistic and cultural mediation, to take care of them in a proper and efficient manner, respecting their cultural and religious needs. As a matter of fact, mediation, apart from strengthening the cross-cultural competences of the whole team, facilitates the interven- tion process and strengthens it with a double and mutual process of interpre- tation of communication. The minor shows the capacity of absorbing and conducting personal and linguistic aspects related to the daily world of origin. This is why it is impor- tant to tell the minor that he/she has the right to include these aspects in the activity and can express and acknowled- ge them. The role of the linguistic and cultural mediator is hence fundamental; it is a necessary and encompassing role affecting various levels of proposed activities. The purpose is to help building relationships within groups of integrated interventions of the team, which are fundamental to create, or recreate, those communication channels which are so much important for the interpersonal settings, acknowledging and enhancing cultural identity.

Among the working tools at the dispos- al of the team, some specific materi- als are included, which will briefly be mentioned. Given the variability of the intervention setting, for what concerns both the number of migrants and the features of stays of the hosting the activities of Terre des Hommes, the team makes sure to always have a PC, blackboards, geographical maps, sheets of paper, pens, notebooks, photocopies of the learning units, books, colours and all materials which can turn out to be useful for specific workshops. This allows a certain flexibility while carrying out the activities, according to relevant needs detected at the moment.

Furthermore, in order to create an orderly system and a reference in often chaotic places perceived as transto- ry, the team marks on a calendar the
days of presence in the centres with announcements in the main languages and in specific languages which might be spoken in a specific group at a specific moment (English, French, Arabic, Bangla, Tigrinya, etc.). Same goes for the delivery of the monthly calendar of praying times for Muslims, because the team, especially thanks to the assistance of the mediator, acknowledges and values religious praxis. Finally, in order to always keep open a communication channel with minors, even beyond verbal communication, the “post box” is built together, where users can leave a message for the team. These messages have very often conveyed topic suggestions for the workshops of orientation to the Italian settings, they have provided a spontaneous feedback of the intervention or have raised important key questions.

**PSYCHOLOGICAL SUPPORT**

As in the case of the Hotspot, in CPAs/CASs also, the team psychologist, besides participating in the activity planning and carrying out some activities in a multidisciplinary manner, takes care of managing situations needing a specialised intervention. The psychologist detects vulnerabilities to report to competent authorities for an immediate transfer, taking care of a referral to territorial services of mental health (Psychological Referral) or, even collaborating with these services, treating those situations requiring a support intervention.

Some of the guests of CPAs/CASs can in fact show symptoms of different intensity, often related to previous traumatic experiences, and as often, related to life conditions in the reception system.

From a symptomatic point of view, symptoms such as confusion, worry, anxiety, sleep troubles, mood deflection, irritability with tendency to verbal burst, sense of guilt and self-accusation, are frequently observed. In several cases, appetite troubles were also detected with important weight variations, social withdrawal and suicide threats.

These are symptoms linked to extreme experiences, such as torture, risk of losing one’s life during the journey, witnessing the death of loved ones without being able to do anything to avoid it.

It is not difficult to understand how such symptoms can be frequently witnessed in the reference target. Nowadays, the dynamics of the journey and of the permanence in Libya are well-known; that is why it could be said that every person coming from similar experiences shares an amnesia characterised by a series of highly traumatic events. It must be reminded that detecting and taking care of all situations where the individual cannot mobilise his/her resources to face the experienced stress, is very useful. Furthermore, it must be added that such problems are very often the cause of the use of substances, like self-medication, which is frequent in CPAs/CASs.

Each meeting is registered in the project database, as well as the potential referral of the case to territorial services, according to abovementioned methods. The Centres especially focus as well on the detection of the user’s resources and on his/her migration project, in order to support it.

During these consultations, psychosomatic troubles are frequently registered, in which unease manifests itself on the body with symptoms which must be analysed in order to detect very deep levels of “inexpressible” anguish. Among the most frequent symptoms, there are:

- Itches and rashes which do not have aetiology diagnosable from a medical point of view. These are particularly relevant, because they refer to the self-other border and are often related to experiences linked with violence of one’s body boundary and unease experienced in conditions of extreme promiscuity and pervasive violence
- Headache, abdominal pain, body pain, hot body sensation: these all refer to a somatisation of the unease, which could be due to several reasons. However, in psychosomatic troubles more than in other cases, the reference to different cultural codes than ours is obvious, and these codes must be recognised and respected. This obviously applies to all psychological and psychopathological problems of migrants, requiring a cross-cultural approach.

These specialised interventions are influenced by contributions of some authors working on migrant care and trauma⁴⁹.

Finally, the need of a mediation in the mother tongue to carry out psychological meetings needs to be highlighted; not every minor can speak the main languages, and has to face linguistic and communicative barriers which could extend the time needed for comprehension and integration in the context. Using the mother tongue, however, should not be limited to these cases only, if it allows the patient to communicate, the untranslatable to be translated, it makes the events experienced in his/her language immediately available and highlights the contradictions between worlds, the “places” where thinking often stops and its development comes to an halt⁴⁹.

---

⁴⁸ Courbin, 2008.
⁴⁹ See authors quoted on page 11, item 14, and in page 14.
The interventions and activities provided according to the IASC Guidelines, just as it is the case for the landing docks and the Hotspot, are distributed across the 4 layers of the pyramid of interventions of mental health and psychosocial support.

The activities which can fall into the pyramid base “Basic services and security” are substantially the reception groups of newcomers in the centre. As a matter of fact, very often no CPA/CAS worker gives the minor information about the place where he/she is and no activities are organised to make him/her feel safe and protected. Terre des Hommes, besides pushing the facilities to provide such services, offers newcomers autonomous activities of group reception, making them feel welcome and giving them the opportunity to get to know an organisation which will be a constant presence in the life in the centre and which is usually reassuring. This is why reception activities are carried out in teams. On one side, all involved professionals must be introduced and the offered services must be explained; on the other side, the purpose is to create an environment conveying to the minor the fundamental message that, albeit coming from the outside, there is an organisation taking care of him/her, ready to meet his/her needs. During this activity, reception kits are distributed, which, beside the phrasebook with the first useful sentences in the main languages with Italian translation, in the case of families, the kit with its objects reassures the family that they have arrived in a place where they can take care of themselves and little by little go back to normality.

On the second step of the pyramid “Community and family support”, there are, on one hand, those activities allowing to go back to routine and normality and, on the other hand, those activities which can help strengthen support networks of spontaneous groups in the CPA or formed by family members. In effect, it is not possible to ignore the fact that the majority of users of Terre des Hommes are people who, after traumatic and/or forced migration experiences, have lost the support of their networks and cannot benefit of the support of the new reference communities. Therefore, most of the time the teams work with alone and isolated individuals; that is why it is essential to support, reinforce or build material and emotional support networks by, for example, enhancing existing family relationships in the case of unaccompanied foreign minors, or by enhancing friendships which inevitably form within spontaneous groups in the centre. The activities organised to manage these group dynamics are the following: Italian and recreational and linguistic workshops, creative expression workshops, workshops for children in emergency settings and in the short term and workshops for children in the medium term. Moreover, it has been observed that the support of far-away family networks is facilitated by the availability of computers through which migrants can maintain a relationship with family members and friends.

On the third step of the pyramid, “Focused, non-specialised support”, the majority of activities of psychosocial support carried out by the team are included: orientation workshops, discussion and debate groups, skills analysis, groups of detection of needs and groups of impact assessment of the activities of Terre des Hommes. These two last activities surely have a central role for what concerns the work planning and assessment of launched project; however, it must be highlighted that they are part of the focused non-specialised support activities, since they become the centre of participatory processes carried out by the team to give back to users a certain subjectivity within settings which depersonalise them and make them passive. With this purpose these activities clearly focus on the users’ wellbeing and on the prevention of unease.

Finally, the last level of the pyramid includes specialised activities to detect psychological vulnerabilities, direct treatment and treatment through collaborations with mental health territorial services. Such interventions are carried out in individual settings or in groups and can be structured differently according to detected problems. Some interventions of the activities carried out by the Terre des Hommes team are described as follows.
THE BUBA CASE (POZZALLO)

16-year-old UFM coming from Western Africa, who has been treated by the Terre des Hommes psychotherapist for 5 months for a total of 13 meetings.

Buba is taken into charge by the Terre des Hommes psychotherapist upon landing and will be treated until his transfer into another First Reception Centre. He attended lower secondary school in his country of origin. He is an only child and has lost both his parents: his father was murdered for political reasons when he was 15 and his mother died due to an illness. He says that he was a victim of discriminations in his country of origin due to the father’s political militancy and has endured physical, sexual abuses and torture during his migration journey in Libya. Furthermore, he tells that he has witnessed the death of several migrants during the journey, lasted roughly 8 months, as well as fearing constantly for his own life. When he tells his story, he experiences feelings of helplessness and terror.

During his first meetings, he shows serious post-traumatic symptoms which according to him have arisen after his arrival at the CPSA (First Aid and Reception Centre): insomnia, flashbacks, spatial temporal disorientation, irritability, mood deflection, avoidance of situations which might re-activate the trauma, hyperarousal state, chronic stress and an life experience of threat and terror, together with a feeling of diffidence towards the world, which becomes acute in interpersonal relationships. Furthermore, the minor has experienced several dissociative events, characterised by derealisation and depersonalisation and during which he talks in his mother tongue.

THE THERAPEUTIC PROCESS

At first, the minor showed a deflected mood and a feeling of disorientation due to the lack of continuity between his current and past self. He looked absorbed by his past and obsessively repeated his story. The post-traumatic symptomatology hindered him in his daily activities, together with a feeling of shame because he could not manage his symptoms. During psychological meetings some avoidance behaviours were also observed. They arose as triggers (situations causing traumatic flashbacks), when he was prescribed medical examinations and injections, i.e. situations which brought him back to the torture endured in the prison in Sabratha. Buba described pain in his inferior arts, which seemed to be related to the continuous endured torture; some paranoid features were also detected, such as the fear of swallowing substances which could damage his organism (a fact that really happened during his detention in Libya). He also showed diffidence at times towards facilities workers, due especially to the long wait for the documents (delays in the conviction to apply for international protection, in the granting of the Residence Permit for Minors, etc.)

During the therapeutic pathway, Buba became more aware of what happens to him during the dissociative events and has gained a good communication skill and an ability to share his experience within the therapeutic relationship. Moreover, a reduction in his initial hyperarousal state and somatisation was observed, as well as a better ability to manage his post-traumatic symptomatology which at first forced Buba to isolate himself from the social context.
Feeling that his past events and the specificity of his current experience were understood helped him build a relationship based on trust with the psychotherapist of Terre des Hommes. Furthermore, Buba managed to build friendships with some peers as well as good relationships with CPA workers and volunteers. The capacity of rebuilding human contacts, albeit the repeated violence perpetrated by Libyan smugglers, developed together with a higher trestment in his body and a decrease of the post-traumatic symptomatology. Buba has hence started to participate again in the activities of the facilities, significantly benefiting from Terre des Hommes: the literacy course in Italian language, the service to open an e-mail and a Facebook account and the loan of books; he has also been regularly going to the psychological support.

Moreover, the minor has acquired more communication skills, learning to openly speak about his hardships and to ask information about the status of his bureaucratic papers, his medical exam and the protocol. Buba was able to listen to his own administrative papers, his medical exam and lost look, while trying to keep a calm and attentive in saying goodbye to workers and friends inside the CPA, giving to his grand-daughter the literacy course in Italian language, the service to open an e-mail and a Facebook account and the loan of books; he has also been regularly going to the psychological support.

At the end of the treatment, he was asked to share the elaborated psychological report: Buba was able to listen to his own story, adding spatial-temporary references and contextualising the events of violence and torture which he endured. A copy of his report was then given to him and the continuation of psychotherapeutic treatment in the target facility was agreed upon.

The story of Shazam and her family (Augusta Port)

Shazam is a 6-year-old girl. She arrived in the Augusta port with her mother, Nagaret, 27 years old, and her grandmother, Sara, 61 years old. Three generations of women coming from Kurdistan. They travelled from Turkey to Italy on a sailing boat, together with 40 other Kurds, mainly families with children.

Immediately after landing, Nagaret was transferred to the hospital for cardiac problems. Shazam and Sara stayed as the port. That same afternoon, all people who had travelled with them, were transferred to another region. The Terre des Hommes team met Shazam and Sara, seating close to the Immigration Bureau, waiting for news of Nagaret. The old woman had a disheartened look, while trying to keep a calm and attentive in saying goodbye to workers and friends inside the CPA, giving to her grand-daughter the literacy course in Italian language, the service to open an e-mail and a Facebook account and the loan of books; he has also been regularly going to the psychological support.

After roughly twenty minutes, the family finally reunified in the centre where Sara and Shazam had been transferred the day after the report to the Public Procurement.

The case of Edris (Augusta Port)

Edris is 16 years old. He arrived in Augusta along with a group of six months more or less, two of which spent in Libya. He fled from his country, Somalia, after having been kidnapped and imprisoned for three months by the Islamic militia of Al-Shabaab to force him to fight alongside them. In Somalia he left his parents, a 20-year-old nurse and two younger brothers.

During the first night on the dock, the boy tried to escape, convinced by some compatriot adults that if he had stayed and gotten his fingerprints taken, he could not have reached his uncle in Sweden. He was found by some NGO volunteers working in the port, not far from the port, seeking shelter from the cold, and he was brought back. The following morning, the team of Terre des Hommes, informed of what had happened, approached him and offered him listening, containment and some basic information about how to reach his uncle the safest way. During the same day, the team contacted another organisation working in the reception process, the Public Procurement, with family members regularly resident in other European country, so that they could verify Edris situation and give him more detailed information.

During the first meeting, the boy appeared clearly discouraged, difficult and tense. He felt represented by the country of origin, very often a tootache. At the end of the afternoon, a group of Somali girls was transferred from the port to a reception centre. The boy for Edris that broke the camel’s back. He was seen wandering around the camp’s square, sighing and moaning. The team approached him and saw that the minor was trembling and was out of breath, managing only to utter some words and repeating them “I don’t go, I don’t go... It’s cold... I don’t have a life”. He was brought to the tent of the Provincial Health Authority, a hot and more welcoming place, where Edris stopped his psychic episode: symptoms of an acute anxiety state became clearer, such as accelerated cardiac beat and breathing and momentary absences. The psychologist offered him the necessary support and emotional containment. After roughly twenty minutes, the minor started feeling better, breathing regularly again and properly establishing a contact with other workers present there (besides the psychologist, the mediator of the team of Terre des Hommes and the nurse of the Provincial Health Authority). It was then possible to have a deeper talk with him to verify his situation and give him further support.

Edris talked about his incapability to tolerate his stay at the port due to his psychological fragility coming from past traumatic experiences. He was hoping to find safety and rescue in Europe, in Italy, where he found a chaotic and precarious situation and he suffered an emotional breakdown: in that moment he didn’t seem capable of putting in play his own will to face the situation. During the meeting, Edris said several times: “nothing has changed”, “there is no future”. This condition seemed serious and thus Edris was transferred to the hospital for cardiac problems. After the report to Social Services, Edris was transferred, that same day, into a second reception facility. The team then got in touch with the manager and the psychologist of the hospital to share useful information and opinions to ensure that the boy be properly taken care of.

Examples of psychosocial activities co-managed by the CATANIA team

The activities described hereafter are offered during two significant moments of intervention inside the CPA: at the beginning and at the end. The description refers to what has been carried out in a CPA in the Catania province at the beginning and at the end of the activities with a group of more or less 15 UFMs, followed for 6 months by the team.

As previously mentioned, although the most fundamental moment to establish a relationship with users is that of group reception, even in the immediacy of the case, it is necessary to carry out activities which help build a relationship based on trust with the team; it is absolutely necessary to provide on-site support intervention helping them face both daily difficulties and the hardship of a stressful situation often filled with traumatic experiences. Therefore, an expressive activity was co-planned and co-managed by the entire team is often offered, with the purpose of helping to know each other and at the same time, recalling one’s own belonging and emotional past linked to the migration experience. Similarly, the activity is intended as an opportunity to enhance the context of origin, often forgotten too soon, especially when reception experiences support a fast and violent acculturation.

In this specific case, the group was asked to create an object capable of representing him/herself as an protagonist by using freely chosen materials (drawing sheets, colours, modelling clays, magazine cut outs, wool, cotton, twine, coloured rocks, rocks, shells, coloured fabric); this experience uses the transformative potentials of creating something, as well as sharing in a group the thinking and elaboration of the experience. As a matter of fact, after the creation a group sharing followed, letting everyone decide how much they wanted to be involved.

The purpose of the activity was to trigger active participation and empowerment of the experience of participants and the learning possibilities which each participant could have provided the Terre des Hommes workers.

To improve compliance to the activity, avoiding the feeling of having to say something about oneself in a context where workers would never have done it, putting themselves in a privileged position compared to participants, the psychologist, anthropologist and mediator also created objects representing their own countries of origin.

The involvement in this production activity was high and the participation to the next sharing phase was also good.

Some minors did some drawings, although the majority created objects with modelling clays and other materials by, using already existing fundamental parts of cultural and social tissue with a basic function of unification of community members (flour, pasta, sugar, salt, etc.). This objects were then used as fundamental parts of cultural and social tissue with a basic function of unification of community members (flour, pasta, sugar, salt, etc.). This objects were then used as fundamental parts of cultural and social tissue with a basic function of unification of community members (flour, pasta, sugar, salt, etc.). This objects were then used as fundamental parts of cultural and social tissue with a basic function of unification of community members (flour, pasta, sugar, salt, etc.). This objects were then used as
In this particular case, the group was asked to write on a sheet of paper divided into two parts, on one side a message for the team (“I would like to say to Terre des Hommes that…”), and on the other side a personal opinion about the work carried out in the past six months (“I will remember of this experience…”). Aware of the different value given to written words in the community of belonging, writing is chosen as a tool of expression, a powerful tool of elaboration which allows to express thoughts and feelings sometimes impossible to describe orally.

In fact, once they had done writing, they shared their composition, with a different involvement according to each individual and with the possibility to decide not to share what was written. The task was conceived to convey feelings and sensations which had otherwise been difficult to express or describe. As a matter of fact, the end of an aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

Sharing in a group allows to describe these feelings with words, with a natural containment function carried out by the group itself.

The minor is invited to think about what he/she gained from the experience to boost him/her to use his/her personal resources making his/her life experience more subjective and defining and planning his/her future. Amongst the messages for the team, some of them linger on the relationship patterns, thanking for the “courage” and “kindness”, while other messages bear the current relationship, others express their feelings through prayers and blessings.

Another minor drew two intertwined hands, one white and one black, leaving a message of equality beyond skin colour. The psychologist represented Sicily with the sea and Etna, explaining that in some popular songs, the volcano is called the great father of Sicilians. The mediator created a blanket, gift from the grand-mother to the mother when she migrated to Italy. The anthropologist represented an olive tree, symbol of Sicilian origin, but also the tree of words.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

Sharing in a group allows to describe these feelings with words, with a natural containment function carried out by the group itself.

In this particular case, the group was asked to write on a sheet of paper divided into two parts, on one side a message for the team (“I would like to say to Terre des Hommes that…”), and on the other side a personal opinion about the work carried out in the past six months (“I will remember of this experience…”). Aware of the different value given to written words in the community of belonging, writing is chosen as a tool of expression, a powerful tool of elaboration which allows to express thoughts and feelings sometimes impossible to describe orally.

In fact, once they had done writing, they shared their composition, with a different involvement according to each individual and with the possibility to decide not to share what was written. The task was conceived to convey feelings and sensations which had otherwise been difficult to express or describe. As a matter of fact, the end of an aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

In this particular case, the group was asked to write on a sheet of paper divided into two parts, on one side a message for the team (“I would like to say to Terre des Hommes that…”), and on the other side a personal opinion about the work carried out in the past six months (“I will remember of this experience…”). Aware of the different value given to written words in the community of belonging, writing is chosen as a tool of expression, a powerful tool of elaboration which allows to express thoughts and feelings sometimes impossible to describe orally.

In fact, once they had done writing, they shared their composition, with a different involvement according to each individual and with the possibility to decide not to share what was written. The task was conceived to convey feelings and sensations which had otherwise been difficult to express or describe. As a matter of fact, the end of an aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.

During the sharing step, important moments were also shared with the group and people talked about their childhood, the political situations in their countries, about some family members, leading with these contributions to a reflection upon the current moment, the migration experience, their wishes for the future, topics which are often not touched upon in first reception centres.

Building a relationship based on trust with users is important for psychosocial support, as important as facilitating the interruption of aid relationships. The intervention of Terre des Hommes is conceived as temporary and hence the end of the aid relationship can turn out to be more difficult for people who have experienced interruptions of traumatic ones, of affective relationships and are currently isolated from their own family network.