FOCUS Approach to Dynamic Integration



Bridging research and practice

The FOCUS Approach to Dynamic Integration is a practical framework to strengthen existing promising integration practices and support the development of new ones. At its core is the idea of fostering social bonds, connections and bridges among arriving and receiving communities.

The FOCUS Approach to Dynamic Integration was developed according to findings borne out of the <u>FOCUS research and</u> <u>innovation project</u>, funded by the European Union's Horizon 2020 programme. The project conducted multi-site field research and an extensive mapping of relations between arriving and receiving communities that ultimately informed the development of a <u>Resource</u> for European dynamic integration practitioners and policymakers working at regional or local levels.

A mapping exercise in the beginning of the project included a deep dive into key psychosocial factors influencing the integration of arriving and receiving community members. The <u>findings of this mapping</u> outlined the clear need to conceptualise integration as a dynamic, two-way process that should involve integroup contact opportunities between arriving and receiving community members to support change and better foster dynamic integration.

To expand on this, key informant interviews further explored core components assumed to be integral to dynamic integration programming.

Based on these interviews, a literature review, and the before-mentioned mapping exercise, four core dimensions of integration practices were identified:

- » Mental health & psychosocial support
- » Arriving & receiving communities
- » Participatory & co-creative approaches and
- » Multi-stakeholder partnerships & coordination.

Mental Health & Psychosocial Support

Multi stakeholder partnerships & coordination

FOCUS APPROACH

Arriving & receiving communities Participatory & co-creative approaches

Mental health & psychosocial support (MHPSS)

Incorporating Mental Health and Psychosocial Support (MHPSS) as a standalone integral dimension to successful integration practices highlights the importance of concretely addressing mental health and psychosocial needs and providing psychosocial support as part of standard practice.

Implementing staff and volunteers should be trained to broaden their understanding of MHPSS not only as a vehicle for the identification and management of clinical mental health conditions, but as an avenue to strengthen social and community supports to broadly improve individual and community levels of wellbeing.

The FOCUS Approach to Dynamic Integration recommends moving away from a sole focus on trauma-informed care and ensure mental health and

psychosocial considerations are considered more broadly.

Dynamic integration programmes should consider psychosocial aspects of practice and ensure those

working with the forcibly displaced are able to identify and refer persons in distress and connect them with appropriate services. Specialised mental health care should be provided in a way that is culturally sensitive and informed and consider topics such as racism and discrimination.

Psychosocial support should be provided as part of broader community services and informed by the (multi-)cultural backgrounds

of communities and their members. According to this multitiered model, MHPSS should be adequately considered as part of integration-focused programming.

Arriving & receiving communities

If integration is defined as a dynamic two-way process, practitioners must shift away from a sole focus on peerto-peer (e.g., migrant-to-migrant) social relationships to support settlement – as is often favoured in integration programmes – but ensure that receiving communities are equally actively engaged and able to contribute to the integration process.

Providing opportunities for receiving and arriving community members to interact in a constructive and positive way appears key to facilitating social bonds and connections. More important than the quantity of contact is the quality and nature of those interactions. Safe supportive spaces are essential for meaningful interactions.

The importance of establishing and reinforcing continuous *social bonds*, *social bridges* between receiving and arriving communities, and community members' *social links* to relevant services has long been acknowledged in research.

Contact between groups has been noted as important in influencing attitudes, emotions and behavioural intentions receiving and arriving community members can have about each other, and how much trust they have amongst themselves and in services.¹

The categorisation as an 'arriving' or 'receiving' community member is not fixed, with arriving community members becoming part of the receiving community over time as part of the integration journey. Volunteering offers a powerful vehicle for quality interactions between communities and is an essential element of dynamic integration-focused programming within the EU. Volunteers help foster and build social interactions between receiving and arriving community members and can engage receiving community members in integration practices beyond the typical 'helper/recipient of care' dynamic.

Volunteering also provides a crucial entry-point to the community for newly arrived persons, as they gain credibility within their peer groups and can

be considered knowledgeable and able to advocate and educate for reducing stigma against arriving communities and for an increased understanding of receiving and arriving communities in general.

In the seminal work conducted by Ager & Strang (2008), refugees discussed integration as engaging in a range of activities with people from different groups. Activities often did not focus specifically on the settlement process but rather

on promoting enjoyable interactions between groups to naturally facilitate and promote quality contact between receiving and arriving communities. Such activities included engaging in arts and crafts or other creative hobbies, engaging in sports, or simply holding town meetings where equal participation was sought and ensured.

FOCUS has identified volunteerism as an instrument to operationalise dynamic integration, as it activates community members for the development of the 'whole of community' and can provide arriving community



members with opportunities to participate in the wider community and, ultimately, society.

The domains of the *Indicators of Integration framework*² (Housing, Education, Work, Leisure and Health and Social Care) can be seen, in these terms, as 'reservoirs of resource' from which both arriving and receiving communities may draw and invest in securing other resources³. The action

delivered and the social connections established via volunteerism can lead to 'resource acquisition spirals' which in turn can contribute to social, economic and political progression for the community.

Participatory & co-creative approaches

Many key stakeholders in the FOCUS project noted the importance of utilising co-creative approaches to design effective integration practices; however, few were able to provide concrete examples of how this is done in practice.

Ensuring the targeted communities (including both receiving and arriving community members) are part of programme assessment, design, implementation, monitoring and evaluation is crucial to instil community ownership of dynamic integration practises. Asking community members to contribute to programme assessment and design ensures that the implemented practice is culturally and contextually relevant and adequately addresses core needs of all parts of the community.

As an example, the Inter Agency Standing Committee's (IASC) Reference Group for MHPSS in Emergencies issued **core guidance** in 2007 for use in emergency settings, outlining the importance of and strategies for the adoption of participatory and co-creative processes. The guidance emphasises that community members can be drivers of their own care and should be meaningfully involved in all stages of integration-focused programming.

This means shifting the view of community participation from viewing community members as passive recipients of care to viewing them as active participants in developing initiatives that aim to strengthen individual and collective wellbeing, thus creating stronger linkages within both receiving and arriving communities.

> Ensuring equal participation between receiving and arriving community members allows for the establishment of a sense of equality in the creation of relationships and dynamics between and within groups. Giving community members an opportunity to provide input into their care also helps instil a sense of empowerment, autonomy and respect, aligning well with core humanitarian principles.

An additional benefit of participatory and co-creative approaches that is often not considered is the impact on the participating refugee's social capital which has the potential to lead to wider socioeconomic benefits.

Multi-stakeholder partnerships & coordination

Given the diverse socioeconomic needs of both arriving and receiving communities, the establishment of partnerships and coordination with all relevant stakeholders within private enterprise, government and the non-profit sector is essential.

As an example, developing connections between integration programmes and MHPSS actors is crucial, however linkages must also be made with a diverse range of services that support various other aspects of integration. These include services and organisations in the areas of housing, education, work, leisure and health and social care that equally address the arriving and the receiving community's needs. Such partnerships can assist in addressing socioeconomic and sociopsychological factors integral to facilitating integration. An example of this could be partnering with private business to create opportunities for

apprenticeships or on-the-job training to ease the transition into the labour market.

Linkages with municipalities and key government representatives ensure the sustainability of programming and are an opportunity to advocate for change to alleviate common post-migration stressors hampering integration efforts. Advocacy initiatives ensure equal and equitable access

to services, tailored to needs, for both receiving and arriving communities.



³ Strang, A. (2010). Refugee Integration: Emerging Trends and Remaining Agendas. Journal of Refugee Studies 23(4):589-607.6.



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Mental Health & Psychosocial Support

Multi stakeholder partnerships & coordination

FOCUS APPROACH

Arriving & receiving communities Participatory & co-creative approaches

The FOCUS project

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