



# ASSESSING THE NEEDS AND IMPORTANCE OF MENTAL HEALTH SUPPORT FOR REFUGEES IN TRANSIT

Research report for 2024







Assessing the needs and importance of mental health support for refugees in transit: Research report for 2024

### **Authors**

Draga Šapić (PIN – Psychosocial Innovation Network and LIRA lab, Faculty of Philosophy, University of Belgrade)

Jana Dimoski (Department of Psychology and LIRA lab, Faculty of Philosophy, University of Belgrade, and PIN)

Jelena Jašović (PIN and LIRA lab)

Isidora Živić (PIN)

Maša Vukčević Marković (Department of Psychology and LIRA lab, Faculty of Philosophy, University of Belgrade, and PIN)

### **Research Supervisor**

Biljana Stanković (Department of Psychology, Faculty of Philosophy, University of Belgrade)

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The primary objective of this report is to provide information on the psychological difficulties of people who were forced to flee their home countries for different reasons. For better readability and simplicity, the term *refugee* will hereinafter be used to refer to all participants in the study, regardless of their legal status at the time of the research.

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### **Summary**

Although the number of the refugees passing through Serbia has declined comparing to the trends from the previous years, the difficulties they face do not subside, nor do the needs for various forms of support. The goal of this research is better understanding of the needs and importance of mental health support in the refugees in transit.

The research was conducted using qualitative methodology and semi-structured interviews. 12 adult refugees accommodated at the Asylum Centre Krnjača in Belgrade were interviewed. The interviews were analyzed using thematic analysis. The analysis of the interviews identified three major topics:

- Importance of informal mental health support the results show that the refugees often resort to informal types of support, such as personal resources, activities and conversations with the people from their surroundings, but these resources have a limited capacity and range.
- Importance of a mental health professional professional support was recognised as key resource and address in the case of need for mental health support. Refugees indicate profession, knowledge and experience of the professional, empathy, understanding and establishing of a good relationship as the most important elements of support.
- Characteristics of the professional mental health support participants emphasize the need for psychological and psychiatrical support that would be flexible and adapted to specific needs of the refugees when it comes to location and format of support. It is important that the support is timely and available when problems occur.

### **Summary**

The results of the research indicate that it is necessary to improve the level of information of the refugees regarding available services and resources for mental health protection. Also, it is organise recreational. creative necessarv to psychoeducational activities inside and outside the collective centers, adapted to various age and gender groups. Peer support may be a useful preventive resource, but must not be a substitute for professional help. Specialised professional support should be provided, especially for persons with more pronounced mental health difficulties. A flexible approach in support should be employed, including frequency and formats of support should, along with respect for the preferences of each individual. The professional support should be timely, or available in the moment when persons struggle with difficulties, which speaks of the importance of both emergency mental health support and continuous support during transit.

# INTRODUCTION

The number of people that face forced displacement continues to grow on the global level year after year. The UNHCR report for 2023 again shows record values with the estimate that 117.3 millions of people were forcibly displaced, of which 43.4 millions are refugees, asylum seekers and other persons seeking international protection (United Nations High Commissioner for Refugees [UNHCR] 2024).

One of the possible routes used by the refugees worldwide to try and reach the Western Europe is the Western Balkans transit route that includes Serbia. Due to various policies and practices and variable migration flows, the Western Balkans transit route records a decline by 72% in the number of people passing through it, comparing to 2023 (FRONTEX, 2024). However, despite the reduction of the number of refugees passing through Serbia, their problems remain unchanged (Dimoski & Vukčević Marković, 2023), or are additionally complicated by the exposure to illegal transit routes that carry numerous risks - refugees in transit face smuggling that puts them at risk of kidnapping, torture, and various types of human trafficking (Bjertrup et al., 2018; Mandic & Simpson, 2017; UNHCR, 2017). The organisations that offer support in the border areas report increased practices of pushbacks and detention of refugees on the external borders of the European Union (Klikaktiv, 2024), which additionally increases the risk of traumatisation and retraumatisation (Vukčević Marković et al., 2023). In addition, besides the traumatic experiences lived in the country of origin and during transit, the refugees that stay in Serbia for a longer period of time face many psychosocial and economic challenges such as limited or restricted access to the labour market, inadequate living conditions and long and uncertain asylum procedures (Asylum Information Database, 2024).

Due to the abovementioned, it is not surprising that the mental health research of refugees in Serbia in the past 7 years shows that a significant number of refugees manifest signs of psychological vulnerability – the last results from 2023 say that 67% of examined refugees are in acute distress, while among the various problems the refugees deal with, the most pronounced are symptoms of depression manifested by 39% of participants (Dimoski & Vukčević Marković, 2023). Such results indicate the need for providing adequate help and support which would prevent and mitigate mental health difficulties that many refugees face.

The need for mental health support in the refugee population in Europe is confirmed in multiple ways, along with the insufficient degree of availability and use of such services (Satinsky et al., 2019). The experience of conducting support programmes in different European countries shows that the refugees are most often provided with emergency treatment that includes emergency interventions related to physical health, while mental health is often completely omitted from the services provided (Munz & Melcop, 2018). The variable geopolitical situation in the third decade of the 21st century leads to changes in funding flows, and the current possibility for providing such support is of questionable sustainability. Although mental health protection is in the jurisdiction of the healthcare system in most European countries, in middle to low income countries such as Serbia, it most often depends on the civil society organisations, and, in most cases, on short-term and uncertain project financing.

Aiming to improve the availability of adequate support services. research activities studied the healing psychological support and what the beneficiaries perceive as useful. One study says that the refugees have a need for sharing their experiences, including traumatic ones, while the therapist should listen, be constant and present, and able to receive and stay in touch with the content (Kinzie, 2001). Other authors emphasize the relationship of trust as one of the most important characteristics of the expert-client relationship (Jensen et al., 2014: Mirdal et al., 2011), while such need is best met by providing mental health professionals regularly available (Jensen et al., 2014). However, the topic of providing mental health and psychosocial support (MHPSS) in transit is in part problematised, given that the length of stay of the refugees in such circumstances is uncertain (Brune et al., 2014). Moreover, even the mental health professionals themselves do not have a consensus when it comes to providing support in transit and helping refugees in processing traumatic experiences before they reach their desired destination. as well as to providing support to the persons with mental health disorders (Gargano et al., 2022). In addition, the adequacy of specialised services is questioned due to the recognised barriers such as stigma and distrust towards formal support in the refugee population, and there is a marked need for complementary activities of psychosocial support in the community (Miller, 1999; Mirdal et al., 2011). On the global level, there is an ever bigger focus on creation and implementation of peer support programs, but it seems that the possibility for implementation of such programmes in the context of the European transit is limited, considering a large fluctuation of the refugees and a small number of persons that are integrated into the society and empowered and educated enough for providing such support.

Although the need for professional support to the refugees has been scientifically proven, it seems that the resulting practices do not follow the observed needs, and that the newer policies and practices regarding mental health protection of refugees in Europe make the life circumstances of refugees additionally complicated, thus endangering their already vulnerable mental health (Posselt et al., 2020). In addition, an important limitation is that all the abovementioned studies were conducted in developed destination countries in Europe that have more economic power and access to resources, in the contexts that are not so volatile as the case is in Serbia and other countries of the Western Balkans Route. On the other hand, the research conducted by PIN in the last 7 years give us statistical indicators of the problems, but do not provide us with deeper insight into the needs for support of the refugees in Serbia and the most adequate type of support.

Bearing that in mind, the **aim of this research** is to understand the needs and importance of mental health support for refugees in Serbia. We were interested to know what kind of mental health support would be the most adequate for refugees in transit, as well as which factors are the most important in the support process, in order to give recommendations adapted to the specific needs and based on the scientific data.

# METHODOLOGY

### Methodology

### **Participants**

Total sample of the study consists of 12 persons accommodated in the Asylum Center (AC) Krnjača in Belgrade, of which three declare themselves as men. The average age of the participants is 34.5 years (SD1=11.55), ranging from 23 to 53 years. Of these 12, 10 persons are in the asylum procedure, while two have expressed their intention for seeking asylum. The participants in the research left their countries of origin 2 years and 4 months ago on average (range from 2 months to 6 years), while their stay at the AC Krnjača lasted on average one year and two months (range from one month to 2 years and 4 months). Five participants come from Burundi, three from Armenia, two from Morocco, one from Uzbekistan and one from Iran. Four participants are in the center without their family members, while eight of them travel with someone. Two participants are currently using psychological support services, while eight of them used these services sometimes in their lives. When it comes to psychiatric support, two participants are currently psychiatric beneficiaries, and four of them used these services before. Two participants in total have never had an experience of mental health support.

### **Method and Procedure**

Collecting of the research data was conducted from May to July 2024. The research obtained the ethical permit of the Commission for Ethical Assessment of the Research of the Faculty of Philosophy of the University in Belgrade (protocol No. #2024-45) and the approval of the Commissariat for Refugees of the Republic of Serbia.

<sup>&</sup>lt;sup>1</sup> SD - standard deviation

### Methodology

The data was collected through recorded semi-structured interviews conducted by three female psychologists trained for working with refugees, together with cultural mediators, or without them, if the participant and the psychologist spoke the same language. Three cultural mediators experienced in working in the refugee context participated in the research, and the interviews were conducted in Kirundi, Arabic, Russian, Armenian and English language. The participants were asked the questions in their selected language with the assistance of the cultural mediator, with the exception of one interview conducted in English language. The cultural mediators were instructed to interpret from and to the selected language as directly as possible, as well as to talk in first person when interpreting the words of the participants in the research, in order to emulate the participants' voice as much as possible.

Upon completing, the interviews were transcribed verbatim, after which the data was analyzed in the MAXQDA 2020 program. The data analysis was conducted using the principles of thematic analysis (Braun & Clarke, 2006). Prior to the coding process, a short narrative report with basic concepts was written for each interview, in order to preserve the context and to comprehend each story in its integrity. The topics were created by using an inductive approach for creating the coding scheme – the material was read line by line, and the entire process was guided by the research question and goals. Upon creating the topics, the rereviewing of the quotes ensured matching of the raw data with the given topic and subtopic.

### Methodology

### **Ethical Considerations**

In order to ensure the highest possible validity of the research data and research ethics, the question of dual roles of researcher and psychotherapist was taken into consideration when planning and conducting the research. Namely, PIN is present at the AC Krnjača where our psychologists provide psychological support. In order to avoid dual roles, none of the researcher psychologists interviewed the clients they had provided with psychological support at the centre at any previous moment. In addition, due to the fact that PIN conducts the research and provides mental health support, all potential research participants were explained beforehand that, by refusing to participate, they would not suffer any negative consequences for themselves, their legal status, or their access to services at the center. All study participants had a debriefing upon completing the interviews, where the contact of the psychologists providing psychological support at the center was shared, in case they needed additional support.

# RESULTS

### Results

### Summary of the results

Three main topics were identified through the interview analysis: importance of informal mental health support, importance of a mental health professional, and characteristics of the professional mental health support. A schematic presentation of the main topics, as well as the subtopics, is presented below in detail.

### I Importance of informal mental health support

- 1. Self-support
- 2. Informal conversation as a resource

### II Importance of a mental health professional

- 3. Professional as a selected support resource
- Sociodemographic characteristics of professionals
- 5. Professional as an empathetic counselor
- 6. Positive effects of professional support

## III Characteristics of professional mental health support

- 7. Support adapted to beneficiaries
- 8. Timing of professional support

When faced with hardships of refuge, many persons acquire coping mechanisms in which they rely on themselves during the difficulties, which can be a consequence of the lack of other resources around them. The participants emphasize the importance of everyday activities and of their own strengths and abilities by means of which they manage to cope with problems, as well as the role of conversations with other available people.

### Self-support

A large number of participants emphasize self-support, or specific mechanisms and activities they perform in order to cope with stress. One of the preferred ways of coping with stress is solitude and withdrawal, where the participants describe the need for isolating themselves from others when it is difficult for them to regulate their own feelings.

"I don't talk with anybody about that, that I don't feel well and I am not in the mood, I isolate myself and I have to be alone and fight it all by myself." (Female participant No. 12, Armenia)

"I mostly cry, I want to be alone, I sit in the room and cry and that helps." (Female participant No. 3, Armenia)

The role of solitude, on one hand, can be protective and help emotional regulation, but on the other hand, it can pose a risk if regulation is not achieved, or the crisis situation is prolonged and existing resources remain limited.

In some cases, participants clearly articulate putting a conscious effort and energy into coping with problems, particularly in regards to the effort they put into keeping a positive worldview, as well as hope for a better future.

"But psychologically, I always, always try to cope with these problems and focus on hope instead on disappointments. So I try." (Male participant No. 4, Iran)

"Life is how you see it, if you think that life is full of problems, wherever you turn, you will only see problems. But if you calm yourself down, or whatever you do, you see, think positively, and then it is like that." (Female participant No. 8, Burundi)

The effort put into the preservation of the mental well-being and the philosophy of positive worldview speaks of preserved resources among participants that, in spite of numerous life hardships and uncertain future, manage to rely on themselves at the moments of crisis

Besides solitude and withdrawal, participants describe various activities they perform in order to fill the hours and interrupt the daily routine that sometimes affects their mental health negatively. One of the most frequently mentioned activities is leaving the barracks or the collective center and physical movement that inludes walking or a specific physical activity.

"Since I started going out, spending some time outside, being in the nature, somehow changing that routine, I have felt better." (Male participant No. 1, Morocco)

"But then I start to be, to pretend to be, occupied, to tidy my room, to change everything, evertything there. To avoid such thoughts. ... Because, if I don't do anything, I continue to have bad thoughts." (Female participant No. 9, Burundi)

The words of the participants speak of the complexity of life in the collective center while awaiting for the decision related to the asylum procedure or continuation of their journey, given that the circumstances often do not allow them to live independently, or to work for a certain period of time, due to regulations. All that can contribute to the fact that the routine that is not freely chosen and created due to the external limitations, is seen more as a stress or a feeling of being stuck, than as a structure that brings predictability, control or consolation. Therefore all the activities that allow refugees to fill the hours are extremely important and may represent an additional resource in improving their mental health.

# Informal conversation as a resource

Participants emphasize the importance of informal conversation when they deal with their problems. When they talk about the importance of conversation, they firstly mention the conversation itself as a resource, without specifying the person to have a conversation with. Understood in that manner, the conversation may be another activity that the participants use to keep their minds off problems and cope with the routine of everyday life.

"Or I leave the room to go and talk to people. And that feeling disappears." (Female participant No. 10, Burundi)

"The conversation with others, sharing some ideas [help me]." (Male participant No. 1, Morocco)

When it is still talked about specific conversations, many sources of support are mentioned, first of all close people and family members, which is an expected resource in difficult times.

"Sometimes I invite someone I have a good relationship with to talk a little bit about some things, to forget it a little bit, or sleep if I have time." (Female participant No. 6, Burundi)

"When I wait for my husband to come, and when he comes, I tell him everything, then he calms me down and says everything will be all right, or with a humour somehow, and so it goes away." (Female participant No. 3, Armenia)

"So that I can talk with my sister, with my brother, what ever, with my relatives, and then to feel better after that." (Female participant No. 10, Burundi)

Most participants travel with family members, so the people close to them are also physically available as a support resource. However, it is possible to assume that the majority of refugees will not have close others as available resources, especially physically present. When it comes to friends, participants rarely mention them as a resource, while they sometimes mention friends in the context of a resource that is lacking.

"When I have a hard time, I have one friend to talk to and we can talk for hours, I have never talked with someone that way, not even with my husband." (Female participant No. 2, Uzbekistan)

"... since there is no friendship here." (Male participant No. 1, Morocco)

Such finding is not surprising considering life in which even people who travel together often do not finish the journey together. In addition, in the cases when someone stays in one place for longer, big fluctuations of people in the collective centres render significantly difficult the formation of stronger and long-term relations among people, reducing the social support network so that family remains the only and the most important social resource. In accordance with that, it is important to also emphasize the topic of the lack of trust in people that are not the closest kin, where one female participant sees the professional support as the last available resource when the family is not able to help. The lack of trust in people that are not the closest kin may be a consequence of bad experiences that made that person leave the country of origin, or a consequence of bad experiences in transit.

"If there is no professional help, then only family members, close family members, because friend or someone else cannot help you, because you cannot trust other people, except the family members." (Female participant No. 12, Armenia)

Besides the informal support, participants emphasize the impotance of mental health professionals as persons to talk to first during hard times. The participants also express their preferences when it comes to sociodemographic characteristics of mental health professionals such as gender, age and nationality. They choose the professional help because of the knowledge of the expert, and their role as councelors who provide empathy and understanding. Finally, participants indicate positive effects of the professonal support and the ways in which the support changes their personal experiences and worldviews.

### **Professional as a Selected Support Resource**

Asked about the needs and seeking help during hard times, all the participants recognised the need for talking to a professional, especially in more challenging situations. Participants sometimes speak about their personal experiences, while sometimes they talk about general needs of people in the similar situation.

"But if it was very dangerous and important, then yes, I would like to go to see an expert." (Male participant No. 4, Iran)

"Someone who is not among my friends but an expert, once, maybe twice a week, but a professional." (Female participant No. 3, Armenia)

When it comes to a specific profession indicated by the participants as a selected address for seeking support, most frequently a psychologist is recognised as a resource, followed by medical and psychiatric assistance. The representatives of the civil society organisations are used as a reference for expertise.

"I think it would always be better if there was a psychologist available for talking." (Female participant No. 6, Burundi)

"Maybe as some medical assistance, and certainly a psychological assistance, with the people that work with traumas, so you somehow let it out." (Male participant No. 1, Morocco)

"Well, I think all these organisations that deal with it. Like, mental health, and all that. " (Female participant No. 8, Burundi)

Participants emphasized the importance of the experts' knowledge, implying that it makes them a reliable resource, and that it inspires trust in beneficiaries and represents a guarantee that the beneficiary will receive the help and support they need.

"Well, a psychologist is good for me, as I think they have enough knowledge to give me the support I need." (Female participant No. 6, Burundi)

"It doesn't matter whether she is younger than me, as certainly, being an expert, she knows better than me." (Female participant No. 9, Burundi)

The expertise was associated with a professional approach to work, so the participants also mentioned the importance of confidentiality in psychological sessions as a characteristic of professionalism and expertise. This characteristic is especially important when taking into account the mentioned lack of trust in people that are not close or relatives. Confidentiality is extremely important in the context of collective accommodation in which there are many external actors such as representatives of the civil society organisations, as well as other employees in the center, besides regular residents. The fact that in such an environment there is a large flow of various information about the beneficiaries speaks about confidentiality as an especially sensitive topic in this context.

"And I felt even better because I had talked with someone whose profession that is, so that I was sure instead of having fear of that the person will later go and talk about me, she feels that way and she is so weak, I was sure that everything was normal and it would be better. There is no risk that I will hear that later outside, after the conversation." (Male participant No. 6, Burundi)

Besides emphasizing the importance of professional support by the mental health professional, the participants compare the professional support with the support they could obtain from an expert by experience, or the person that might have had similar life experiences in the refugee context. Some participants recognise the benefits of such support, particularly for less significant problems, which might be compared with the mentioned support obtained from friends or other close persons.

"And some people, maybe it is a situation, in which it is better to talk with some people that lived thorugh the same things. And have some kind of a conversation. Then it is not something scary to need some professional expert that knows that exactly." (Female participant No. 10, Burundi)

"I think, as far as emotions and all those things, I think that a professional would be the best choice. But, if it is something general, it might be anyone with experience in it." (Female participant No. 11, Burundi)

However, most participants sees more benefits from the conversation with an expert. As a central reason, the participants indicate the differences in experience among persons and how such difference may be an obstacle for understanding specific problems. This contrast additionally highlights the importance that the interviewees attribute to knowledge as a guarantee of success of the support.

"Because that person that was in the same situation, it was maybe the same situation, but in the end we are not the same people, we didn't have the same, the environment was maybe different, or support, or anything, maybe that person had it then, and I don't have it, or maybe I have it, and that person did not have it. So, I think it is better if it is a professional." (Female participant No. 9, Burundi)

"I think it would be better if it is a professional. Because I think, yes, we can have the same problems, but it is not the same level. For example, I can talk to someone who lived in the camp. But I lived through something he didn't, and he thinks it is not exactly like that. But it maybe depends first on the workers that were present when they were present, but they were not the same, it was not the same environment. Conditions, context, maybe it is the same problem, but it is not the same in the end." (Female participant No. 8, Burundi)

# Sociodemographic characteristics of professionals

The participants also shared their preferences when it comes to sociodemographic characteristics of the experts such as gender, age and nationality. The participants either did not have a preference regarding gender, or they preferred working with a woman. Some participants used their religious affiliation or traditional patriarchal values and roles as an explanation.

"I think it doesn't matter, professionality matters, but since there are Muslims as well, maybe Muslim women would like to have a female psychologist, and men a male one, but generally speaking it doesn't matter, professionalism matters." (Female participant No. 2, Uzbekistan)

However, most participants that talked more of the experts' gender, all of them women, mentioned the significance of the female experience for the possibilty of providing support to another woman. In other words, the mere experience of being a woman will be of great help to a female professional to understand the client due to shared experiences, which will result in greater quality of support. In addition, there is stigma and a distrust in presenting sensitive topics to men which is tied to social norms in a certain culture.

"Sincerely, it is not important. But maybe it would be the best for me if it is a woman, as I think that, as I am also a woman, that a woman like me can understand me better. It doesn't mean that a man would not, but there are some, some stories that I would be ashamed to tell to a man. To me, a woman, I feel that she knows, since she has lived it for sure, and she can understand me better than a man." (Female participant No. 8, Burundi)

Although the personal experience certainly gives the experts additional credibility, the participants have not shown much trust in experts by experience, so that one might assume that the combination of knowledge and experience is what makes experts trustworthy. It is possible that the generally lower trust in men is associated with cultural factors or life experience of women that come from the countries with low levels of gender equality.

When it comes to the age of professionals, there is not a clear trend in respect of the preferences – most participants said that the experts' age does not matter, while some of them preferred younger or older. However, a certain number of participants referred again to the experience and knowledge as the most important factors regardless of the age of the experts. The same goes for nationality, which the participants do not perceive as an important characteristic at choosing the experts.

"It does not matter, age doesn't matter, I think that age does not influence experience or knowledge, so that it doesn't matter much. ... As it regards where someone comes from, it also doesn't really matter." (Female participant No. 6, Burundi)

# A professional as an empathetic counselor

A very important segment of the research focused on what the participants perceived as ultimately useful and healing within the mental health support services. The participants that had previously used the mental health support services shared their previous experiences, while the others talked in general terms about the factors that would be important for them in case they wanted to seek mental health support. The most prevalent role found in the participants' answers is the counseling role of the professional.

"I really needed her counseling, I heard the opinion of another person, the other way of seeing things and I really needed it." (Female participant No. 6, Burundi)

"When I was in prison, I imagined freedom. I think that the psychologist could maybe help as a counselor for thinking, for reasoning, how to think, and to show me the way." (Female participant No. 2, Uzbekistan)

In the previous quotes it may be noticed that the participants emphasize the importance of the advice related to different opinions and offering a different perspective. Other participants also emphasize the significance of advice of the expert in specific situations in order for the person to receive help in solving certain problems.

"And the advice in every situation how I should act so that it is good for me and for others." (Female participant No. 3, Armenia)

"She gave me all kinds of advice, don't sit in the camp, go out, do something, etc. so that every piece of advice and her approach meant a lot in my life. And me today being calmer and feeling better, she has her share in that." (Female participant No. 12, Armenia)

The second characteristic mentioned by the participants as important in working with professionals is empathy and understanding. Empathy, understanding and active listening represent basic factors of the counseling or psychoterapeutic relationship, which is vividly described in the quote below.

"I don't know what to say exactly, but I think that if, except, if, for example, I find myself in a situation, I will surely feel when, it depends on the conversation, as we talk, as I get to know that professional enough, anything. It is not related to what he or she does, but the, the relationship we have." (Female participant No. 10, Burundi)

The importance of a well-established relationship between the client and the mental health professional is maybe even higher in the context of the refugee situation, if we take into consideration the lack of other support resources.

"Her relationship as she has empathy and understanding and advice and guidelines in all the questions, all that was important to me in order to accept her not only as a psychologist, but also as a close person." (Female participant No. 12, Armenia)

In the quote above, the participant emphasizes that empathy, understanding and guidelines from the psychologist helped her to accept her as a close person as well, which speaks of the importance of the psychologist in her life. The experts therefore may be understood as a resource by itself, but also as a compensatory resource that compensates for other functions that are lacking in the context of refuge.

# Positive effects of professional support

Besides mentioning the characteristics of the professionals important for establishing a quality psychotherapeutic relationship, it was emphasized in which ways the participants would notice that the support had been useful for them and what changes would it bring to their lives. Working with a professional allows the internalisation of self-regulation skills and stimulates independence in the users.

"The support provided by your colleague was very useful to me. We talked several times, but I didn't seek her afterwards, because it was easier for me and I knew how to behave, how to react and to take care of myself." (Female participant No. 6, Burundi)

The importance of the professional support is reflected in the feeling of relief, creating space to ventilate emotions and sharing with another person.

"Most probably to share what I have in me, to speak loudly about how I feel inside." (Female participant No. 3, Armenia)

"When you talk about your problems, you know, there is a nice feeling afterwards, you know? You feel lighter." (Male participant No. 4, Iran)

An important outcome of the support is empowerment when it comes to the view of the future. The possibility of obtaining another perspective may be an additional motivator and help pulling the person out of their negative worldview, as well as offer hope and support in trying to achieve their life objectives despite the hard circumstances.

"And the help not to lose hope in the future, like there is a nice future." (Female participant No. 9, Burundi)

"I really needed her counseling, I heard another person's opinion, another way of seeing things and I really needed that." (Female participant No. 6, Burundi)

One of the indicators of positive effects of support is also the return to the ways of functioning prior to the difficulties caused by the refugee situation. The return to old ways for them would be a sign of healing and consolation in the known feelings and stable picture of themselves, in spite of all other changes happening around them during the refugee situation such as leaving the country of origin or loss of close persons.

"I would feel, maybe I could be emotionally stronger, and not pay attention to these things, i.e. be the way I was before coming here, because I am far away from my relatives, in another country, maybe that is the reason." (Female participant No. 3, Armenia)

Finally, the positive consequences of mental health support are vividly shown by the next quote which speaks of the importance of the regulation of the internal life, which could be compared with maintaining mental hygiene. The expert is seen not only as a resource that gives a person advice in solving internal problems and dilemmas, but also as someone who can provide support in maintaining psychological stability.

"As when they say we should throw away the unnecessary things, and leave the necessary ones. And in that sense everyone needs a psychologist in order for him to throw something away, and to leave something, to leave the necessary things. I can say that here in the camp most probably everyone needs psychological help because, when you enter the room and see there many things scattered, etc., necessary and unnecessary, but a person should deal with his own brain first." (Female participant No. 2, Uzbekistan)

The participants recognised and emphasized the characteristics of the support itself that would satisfy their needs and the needs of other refugees in an adequate manner. The professional mental health support should be adapted to the users by location, availability and format. The participants also emphasize the importance of timing of the professional support, highlighting the need for prevention of more serious mental health difficulties, especially in the situation of transiting through a larger number of countries during the travel.

### Support adapted to users

When it comes to the modality of support which would best suit life in the collective center and the needs of the persons in the refugee situation, one might say that there is not a universally adequate solution. The participants emhasized the need for individual support, especially in the cases when they want to share the personal content that they would not like to share in a group.

"But, then, when it comes to, how I really feel, it is something private. Of which I can talk with the psychologist, during the individual conversation." (Female participant No. 8, Burundi)

"If I am alone, we talk better, I am more open than in front of the others people." (Female participant No. 11, Burundi)

However, the participants are equally open for group sessions as well, where they especially emphasize the importance of listening to the experiences of other people, which, as it seems, has an empowering effect.

"The group is much better because you can hear more experiences from other people. I guess it would be much better, yes." ... "Yes, the same problems and differences, you know, different problems. When you are here and you hear about how people cope (with problems) it is refreshing and inspires hope. You can learn something. I guess it would be much better." (Male participant No. 4, Iran)

The need of the participants to have a phone contact with the professional providing support speaks of the need for the availability of the psychologist. It implies both the possibility for emergency interventions and the possibility for obtaining online support if there are logistic obstacles for meeting in person. However, it is important to emphasize that, in the context of collective centers in Serbia, the beneficiaries do not have access to the internet, or they have it in shared rooms of the centers, which brings confidentiality at risk and impedes the provision of online support.

"As far as I am concerned, it was all ok, and when we could not see each other when she was in the camp, we always talked by phone, which was really important and necessary to me." (Female participant No. 6, Burundi)

"I think that it would be ideal if we saw each other at least once in person, at least once a week. But also for them to be available by phone if it is something urgent, if we will not see each other for another couple of days, or couple of weeks, to at least hear them over the phone." (Female participant No. 9, Burundi)

When it comes to the location for providing support, the participants emphasize the importance of both the support in the center and the support in the office of the civil society organisation outside the center. On one hand, the support in the center facilitiates the access to the support to the users, especially to the persons that hesitate to seek support. On the other hand, it was noticed that leaving the center is a resource by itself, so many participants mention the support outside the center as another reason for activation and interruption of the routine of everyday life.

"The space does not matter to me, where we are, it just matters to have this possibility to see each other and to obtain that support, I mean that help. Ok, the best is to be here in the camp, because then I don't have to go out." ... "If they say, let's see each other today, come, I don't know, to my office, or something like that, that is ok, too." (Female participant No. 8, Burundi)

It can be conluded that different modalities of support are useful from different aspects, and that flexibility in providing support to the users and adapting to their specific needs is key.



### Timing of professional support

As it has been suggested in the previous section, the need for availability of professionals by phone and other online services speaks of the need for the timely support that occurs at the time of need. The support that comes at the moment of struggle can offer the skills of emotional regulation that the person may internalise and later use independently.

"Well, I think that it would be the best if I can receive support when I feel really bad, instead of waiting e.g. the entire week until you come back to the camp." (Female participant No. 6, Burundi)

"I think we need to speak, because the call or the voice hurts when you hurt, we should speak while we hurt, and not when the hurt subsides." (Female participant No. 2, Uzbekistan)

Besides the need for higher availability of the mental health support, the participants also emphasize the positive aspects of mental health screening that would be performed as a regular part of the admission to the collective center. The benefit of such practice includes higher awareness of own problems and a preventive role of personal assessment. The additional importance of mental health screening is seen by the participants in the importance of prevention, in order to protect the people that live in the center, and for the officials to have the data on the persons under the risk of developing severe mental health difficulties.

"I think it is a benefit to think that we get well familiarized with our condition. We can avoid many problems just with that check-up in the beginning." (Female participant No. 6, Burundi)

"Maybe it would be good because, if you know, and if the workers here know the condition of that person, or yes, that would also be easier for them." (Female participant No. 9, Burundi)

However, it is important to emphasize that such form of mandatory screening was not seen as acceptable for everybody. The participants recognise that it is possible that some people would not talk sincerely about their condition in that way.

"When it comes to, like, danger, maybe, it depends on, how that person asks the question. Just not to show that it is really, really about mental health, as some people do not accept that and do not want to accept that. But only to have some kind of a conversation. And I think if it is like that, it won't be a problem." (Female participant No. 9, Burundi)

Timing of mental health support is a significant topic when it comes to providing support during transit as well. All but one participant in the research emphasized the importance of obtaining the support during transit precisely due to all the problems the persons have prior to refuge, as well as the traumas that are possible during travel. The importance of timely support is seen in the possibility for empowering for the continuance of the journey, encouragement to stay in a transit country, as well as uncertainty of reaching the goal and lack of guarantee for obtaining adequate support at the destination.

"I think it would be better that here, while you are in transit, you find someone to help you. Because I think that if you lived through that much there is no point of waiting until you arrive where you go, since you don't know when you will receive that support there. But here you know for sure you will receive it. And certainly life here is not easy as well, so you cannot be here in transit and live such a life. There will be additional problems in your life, and then what you will be like, in which state you will be when you arrive there. Maybe it will be late. Therefore I say that it is better while you are in transit to find someone as well to feel a little easier and yes, to feel a little better before you arrive." (Female participant No. 8, Burundi)

# Characteristics of the professional mental health support

Although rarely, the risks of providing such support considering the fluctuation of the persons in transit and a lack of guarantee for completing the support process, as well as possible mental instabilities of the persons in transit, were also mentioned. Although one should talk about universal principles and guidelines for providing support, the individual needs, resources and characteristics of the refugees should be also taken into consideration and the support that is available and timely, but not mandatory or forced, should be taken into consideration.

"I think it is better if they seek help, or if anyone seeks help when they arrive at the desired destination. I think it is better because, firstly, the professionals don't waste time again and, well, as there is no point in helping someone, if, for example, you start today and everything goes well, and tomorrow he is not here, he left. And secondly, I think that that person is not stable at that moment. Since they think all the time when they will leave, how it will look like, so that since they continue to think about these negative things, there is no point to provide support. So that, I think it would be better to seek help when they arrive to the desired destination." (Female participant No. 9, Burundi)

# CONSLUSION & PRACTICAL RECOMMENDATIONS

The assessment of needs for mental health support among refugees is not a new or insufficiently explored topic, but it is important to acquire insight in the characteristics of the type of support that would meet the needs of the refugees in transit, such as the context of the Western Balkans transit route, in the most adequate way.

The research results show us that refugees resort to informal types of support such as conversations with close people or people in their environment, while at the same time they exhibit selfreliance in coping with everyday challenges. However, such resources are scarce. This also indicates the need for additional psychosocial activities in the community such as sports and recreational activities, psychoeducational and creative workshops that would encourage personal strenghts and skills, as well as strengthen social resources. The mentioned activities would be even more appropriate if they happened outside the collective centers and were adjusted to various age and gender groups. Providing resources for psychosocial activities is especially important, bearing in mind that previous research showed that such activities might influence the mitigation of negative effects of the refugee situation, such as lack of social connections, existential questions, loss of everyday structure and activities (Miller, 1999). In addition, productivity and activity are extremely important factors among the refugees in the process of healing from the trauma and the accompanying mental health difficulties (Hess et al., 2019).

The participants recognise the **importance of the role of a professional** when it comes to coping with serious mental health difficulties and support to psychiatric beneficiaries. A high degree of trust towards the experts is present, and is mostly tied to the profession that the participants see as a guarantee of knowledge and expertise that increases the probability of success of the support.

Besides knowledge, the participants also emphasize the experience of an expert. When it comes to gender, it seems the most adequate if the support is provided by a female expert, given that no participant expressed a preference for males. Preferring a female expert also speaks of the social and cultural norms in the participants' countries of origin. Distrust towards the experts by experience speaks of the limited scopes of peer support in the field of mental health protection, especially when such support is the only resource available. The additional challenge in implementing such support programmes is also education and supervising of peer mentors, considering the small number of persons that stay in Serbia for longer, among which it is necessary to find the ones that are empowered enough and willing to take on such role.

Besides knowledge and experience, the results indicate the importance that the refugees give to **nurturing a good psychotherapeutic relationship** between the expert and the client that will allow giving, above all, empathy and understanding, which is also emphasized in previous studies (Kinzie, 2001; Mirdal et al., 2011). A quality relationship leads to establishing trust that is necessary for psychotherapeutic progress and positive effects of support. Besides the education in some of the areas of the helping professions and additional psychotherapeutic education, the importance of the expert to be educated in the domain of intercultural skills was also recognised, in order to establish a relationship with the persons from the various parts of the world in an adequate manner.

The participants also recognise the importance of the adaptation of services and support to the specific context in which the beneficiaries live. In ideal conditions, the support should be available inside and outside the center, at the location that would be accessible to the beneficiaries and within financially and logistically feasible and sustainable limits. The accessibility of the support in the centres is important especially because of outreach to the persons that need support, and that are maybe not aware of that, would not have conditions, or would not know where and who to ask for help outside the centers. Mental health problems combined with psychosocial and economic stressors of life as a refugee may lead to general distrust, frustration, sense of helplessness, and isolation (Brune et al. 2014). It is not surprising that in such circumstances people have difficulties to motivate themselves to use the available support, especially if it is at a remote and unknown location, so it is necessary to adjust the access to support to the ones that need it the most. In order for the services to be provided to as many people as possible, it is necessary to continuously improve the level of information about the existing support services. In addition, regular visits of experts to the centers are useful in nurturing the sense of structure and routine when it comes to the support to especially sensitive beneficiaries related to establishing the relationship of trust extremely important for the success of the treatment (Jensen et al., 2014). However, given the ever decreasing financial support for the activities for the refugees along the Balkans route, the flexible support model that would imply mobile teams that provide help in various locations, which would lead to saving of already limited resources, could be one of the solutions.

The results that show that the participants advocate for the availability of support in transit due to their own experience of hardships during refuge speak about the importance of **timely support**. In addition, in order for the support to be provided in time, the importance of mental health screening at the admission to the collective center was recognised, in order to influence the prevention of mental problems. However, the participants do not exclude the presence of stigma and potential lack of readiness to answer sensitive questions. That is why it is extremely important to clearly communicate the principles of voluntarity, and the respect of the wish of the person and his/her readiness to answer the questions regarding mental health.

### **Research limitations**

Besides the contribution, the research also has limitations which are important to mention. First of all, participants in the research were asylum seekers staying at the AC Krnjača, in which persons tend stay for longer. Therefore the results of the research cannot be generalized without caution regading the needs of the refugees that transit quickly. However, the sample also included several participants that stayed at the AC Krnjača for shorter period of time, so that the total sample of the participants includes a wider spectrum of the needs. Considering the nature of the research question, one might expect that the length of stay would not influence the sense of importance of the support to a larger extent.

### Practical recommendations

In order to improve the practices in implementation and ensuring adequate mental health support services in transit, the recommendations based on research results are presented below:

- It is necessary to improve the level of information of the beneficiaries regarding the services and the resources available in the domain of mental health protection.
- Gender sensitivity is necessary in ensuring mental health support and in all the situations in which the resources allow it, it is desirable that the beneficiaries may choose the gender of the professional they will work with.
- It is necessary to conduct psychosocial support activities for refugees such as recreational, creative and psychoeducational activities with the aim of reinforcing personal capacities, strengths and skills for coping with life challenges in the refugee situation, and encouraging the social support network. It is important that the activities are held both inside and outside the centers, and to be adjusted to different age and gender groups.
- The research results indicate the need for caution when introducing peer support models, with adequate selection, supervision and continuous support. Peer support, if adequately created, can be a suitable resource, but cannot be considered an alternative to professional support.
- It is necessary to provide professional, specialised mental health support for all the refugees in need, and especially for persons with serious mental health difficulties. Specialised support implies a wide spectrum of primarily psychological, psychotherapeutical and psychiatric interventions and services by means of which it would be possible to meet the specific needs of every individual.

### **Practical recommendations**

- It is recommended that mental health professionals, besides an adequate profession, knowledge and experience, have attended additional educational courses in psychotherapeutic and intercultural skills
- It is necessary for the mental health support to be flexible and adapted to the needs of the beneficiaries in respect of frequency, location and format. The importance of timing of the support right when the persons struggle with difficulties is underlined, with a special emphasis on the need for support during transit.
- Mental health screening at the admission to the collective center may have a protective role, and could enable the planning of the support in accordance with the needs, along with following the principles of voluntarity and confidentiality.

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