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Mental Health and Psychosocial Support in Schools: Learner, teacher, caregiver, and community perceptions of programming and impact

Findings from qualitative research
featuring the Norwegian Refugee
Council's Better Learning Programme in
Kakuma, Kenya

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About the MHPSS Collaborative

The MHPSS Collaborative is a global platform for research, innovation, learning and advocacy in the field of mental health and psychosocial support (MHPSS). We convene key stakeholders – from children, youth and families with lived experience to service providers, researchers and policy makers – to work together for children's mental health and wellbeing. We develop and share knowledge on the latest innovations and research on MHPSS in fragile and humanitarian settings. We advocate to ensure donors and decision makers hear the voices of children, youth and families and prioritize policy and funding for MHPSS. Visit www.mhpsscollaborative.org for more information.

Introduction

At the end of 2022, 40% of the nearly 110 million persons forcibly displaced globally were children under the age of 18.[1] Displaced children face acute and chronic adversities that significantly threaten their mental health and psychosocial wellbeing.[2] The urgent needs of children in humanitarian crises underpin various policies and programmatic approaches that include increasing attention to both mental health and psychosocial support (MHPSS) services broadly[3] and in education approaches specifically.[4] MHPSS in education in emergencies (EiE), including social-emotional learning (SEL), has been identified as an important pathway to address both children's mental health and psychosocial needs and to improve learning outcomes.[5]

There is increasing recognition that quality education is reflected not just in academic outcomes such as literacy and numeracy, but also in those indicating learner psychosocial wellbeing.[1] Learners are embedded within a context of specific relationships, environments, and systems that notably influence their daily lives, learning, and holistic wellbeing. These socio-ecological factors are complex and context-specific, and can have a significant impact on the efficacy of an intervention aimed at supporting children's growth and learning.[2]



Improved understanding of this social ecology around learners can lead to more relevant and impactful program design and implementation. The perspectives of children, caregivers, teachers, and relevant community and education system stakeholders are critical to understanding not just if an intervention is effective, but how, why, and for who.

This research set out to examine the enabling environments for MHPSS interventions delivered in education settings in humanitarian contexts, with specific focus on the Norwegian Refugee Council's (NRC) Better Learning Programme (BLP) implemented in Kakuma, Kenya.

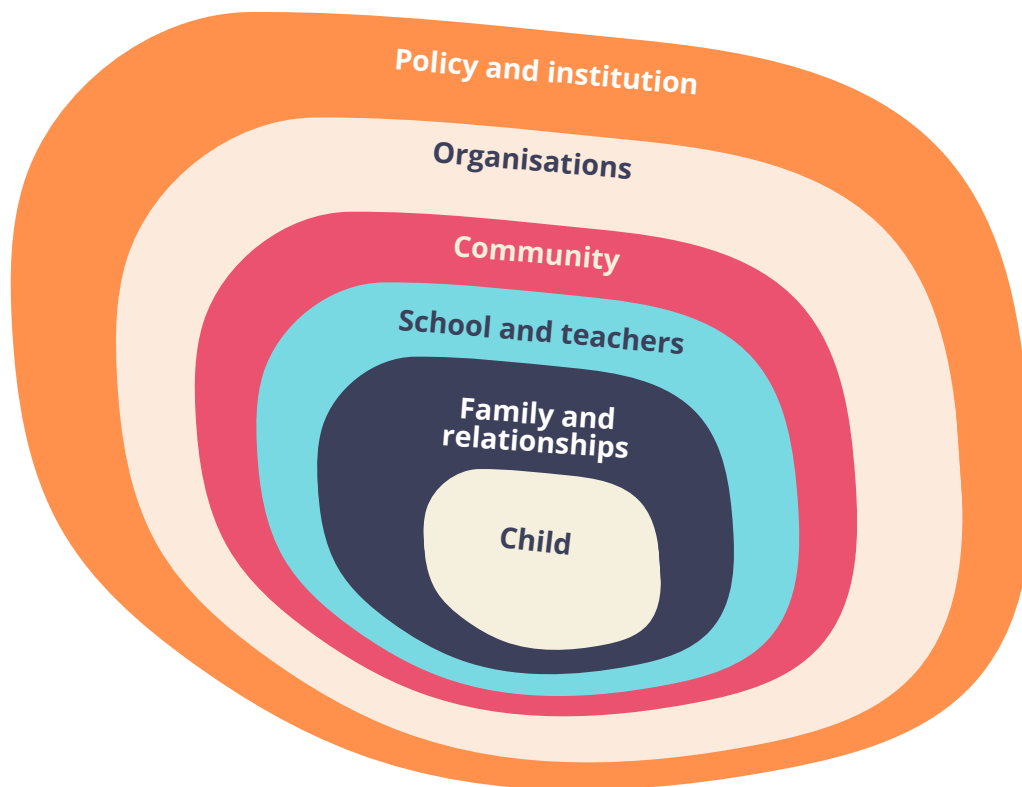


Figure 1: The social ecological framework for understanding children's psychosocial wellbeing in education contexts

Research objectives

To understand what contributes to an enabling environment for MHPSS interventions and approaches to improve holistic wellbeing, from the perspective of children, teachers, caregivers, and other education actors.

To understand the role of education systems, including schools (and formal and nonformal programmes), and educators in contributing to children's holistic wellbeing.

To describe similarities and differences of enabling environments for MHPSS interventions across diverse contexts, including both geographic location and type of emergency or adversity.

To understand how an MHPSS intervention may be useful and relevant in dynamic contexts, such as in the case of education interruptions, and what the role of schools is in supporting children's holistic wellbeing.

To understand the perceived impact of NRC's Better Learning Programme in Kenya, in order to contribute to organizational and programmatic learning and implementation.

NRC's BLP is a PSS/SEL programme which is integrated within education programming in crisis affected communities. BLP is a holistic approach to supporting children's recovery from traumatic events experienced during conflict and from the impacts of displacement on both displaced and host communities, by improving conditions for learning. The programme mobilizes a child's support network of caregivers, teachers, and counsellors, encompassing a multi-layered approach to restore a sense of normality and hope. BLP-1 is a classroom-based PSS approach targeting all children and young people; its implementation in targeted locations in Kakuma Refugee Camp, Kalobeyei Settlement, and host community schools was the focus of study for this research.



Methods

To achieve the research objectives, the target population for participation in the research included children, teachers, caregivers, implementing organization staff, school administration and boards, community-based education actors, and education officials (at local, regional, sub-national, and national level). The research team collected data from 232 total participants across Kakuma and Kalobeyei. This included data collection via 31 focus group discussions (FGDs) and 27 key informant interviews (KIIs) at 9 distinct schools (five schools in Kakuma camp, two schools in the host community, and two schools in Kalobeyei settlement). FGDs were conducted with learners (18 FGDs), caregivers (4 FGDs), and teachers (9 FGDs). KIIs were conducted with the Ministry of Education and Teachers Service Commission officials (n=3), NRC partner organization members (n=3), NRC staff members (n=3), school board of management members (n=9), and school administrators (n=9). The participating learners were aged 6-18 and included both refugee and host community children.



Kenya context

Kenya has long been a host to refugees from neighbouring countries; in 2023 the number of registered refugees and asylum seekers within its borders was approximately 655,000.[1] Refugees are spread across three primary camps (Dadaab, Kakuma, and Kalobeyei integrated settlement), and are also integrated into host communities in both urban and rural settings.

As of September 2023, Kakuma and Kalobeyei (the sites of this research) hosted approximately 276,000 individuals.[1] Kakuma hosts refugees from South Sudan, Somalia, the Democratic Republic of Congo, Ethiopia, Burundi, Sudan, Uganda, Eritrea, and others. Children make up approximately 55 percent of refugees in Kakuma.[2]

Currently, all camps face challenges related to overcrowding, limited access to basic services (such as healthcare, adequate food, education, and clean water), and poor economic opportunities. Refugees often face significant mental health challenges due to the traumas they have experienced prior to arrival in Kenya, including exposure to violent conflict, displacement, and extreme loss.[3] Many refugees suffer from conditions such as post-traumatic stress disorder (PTSD), depression, and anxiety. These challenges are exacerbated by the uncertainty of their situations, lack of resources, and limited access to healthcare, often leaving affected populations undeserved.[4]

The need for MHPSS services for refugees in Kenya is notable, and information related to prevalence of mental health and behavioural problems is lacking. While Kenyan law extends certain rights and protections—including the right to access health services and education—to its refugee residents, there are few official policies that explicitly speak to MHPSS concerns of the refugee population at large.





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Main findings

Understanding and responding to context of intervention

Understanding the dynamic context and ongoing challenges of Kakuma and Kalobeyei is essential in order to design and implement effective and appropriate MHPSS programming.

In Kakuma and Kalobeyei, families and communities cope with both acute and long-term challenges in daily life, including struggle to meet their basic needs and to build towards sustainable futures.

Overall, schools are perceived as a safe and secure space for learners. While research participants agreed that there was a general sense of security for children, particular infrastructure-related challenges were described frequently in many schools.



*Lack of adequate support or enough basic needs can lead a [female] child to move out of her home [for] early marriage or prostitution to meet her needs. This in return affects their performance in class and causes school dropout. **Caregiver FGD***



Contextual challenges—often related to the unmet basic needs of families and communities—pose notable educational risks. The most commonly described education impacts of such risks were school drop-out and nonattendance, with particular risks for girls including early pregnancy and marriages.

While schools were broadly described as safe and accessible, there are significant challenges too for these schools to provide quality, holistic education to all learners including extreme overcrowding.

Importantly, there were real barriers to inclusivity, with particular emphasis on students with disabilities and relevant programming for overage learners.

Across locations and actor-type, research participants were able to describe MHPSS resources that were accessible to them in Kakuma if learners were in need of general or targeted support to their emotional and psychological wellbeing. Still, such resources were often insufficient for the number of learners, and not consistently available.

Perceptions of holistic wellbeing and the role of education

This research underscores the significant role of education in contributing to learner wellbeing and highlights diverse perceptions of educational community members on the value and purpose of school.

Research participants of all actor-type recognize that safety and security are an essential foundation for children being able to learn, and it is an important role of schools to provide a safe learning environment, as well as to assure that children's basic needs are met. Both of these set the foundations for learner's holistic wellbeing and contribute to children being 'learning ready' at school.

The perceived value of school is strongly linked to holistic wellbeing and development of learners. In addition to providing safety and access to basic needs for learners, schools build skills and opportunities for the future, and support learners to develop themselves as humans.

Children perceive a sense of wellbeing, as well as their own physical and emotional safety, from their close relationships (particularly with family, friends, and teachers), their immediate environments (homes, religious spaces, and schools), and activities which help them "quiet their minds" and find relief from challenges of their lived context.

There is a strong sense from parents, teachers, and education actors that schools serve a critical function in providing social, emotional and psychosocial support to learners.



*When they are in school, things are supposed to feel positive and hopeful. They are supposed to feel peace in their minds to ensure that they gain skills and knowledge. This helps them to have hope in their lives and plan for the future. **Teacher FGD***

Relatedly, teachers—as well as other education actors and parents—believe that supporting the mental health and wellbeing of their students is a critical part of their job.

Teacher wellbeing is seen as critical to providing support to the wellbeing of their learners, as well as to their efficacy in creating a conducive learning environment in which their learners can succeed.

Perceptions of impact of NRC's Better Learning Programme (BLP)



*After doing the exercises, you don't wander in your thoughts. You put those thoughts aside and are thinking about the BLP exercise. After doing those exercises, the body relaxes and even if you had pain somewhere, you become okay. **Learner FGD***



BLP is viewed by all education stakeholders interviewed for this research as an important contribution to education programming in Kakuma because of its holistic approach, which actors describe as highly relevant and appropriate for the learners in this context.

Teachers and school staff underline the usefulness of BLP activities in providing playful, child-centered activities different to that of the traditional classroom. Educators describe how BLP activities help bring life and energy into the classroom.

Learners enjoy BLP activities both when they are incorporated into the lessons or done before the lessons. They describe many reasons why they enjoy BLP, most commonly that it helps them to relieve stress, anxiety, and restlessness.

According to teachers, parents and school administrators, there were a number of clear outcomes perceived as a result of BLP that relate to children's holistic wellbeing. These included: improved strategies for coping with stress and difficult situations; improved strategies for calming and clearing the mind; greater satisfaction and happiness while at school; and less conflict with peers.

According to teachers, caregivers, and school administrators, there were a number of clear outcomes related to academic learning as a result of BLP. These included: better concentration and increased engagement with learning activities; an improved conducive learning environment; overall improved capacity to learn; and lower school dropout and nonattendance rates.



*There are so many students in my classroom so it is... easy for things to become very loud and for students to lose attention. When I see this happening, instead of yelling at learners or trying to punish them... I use BLP. We all do the exercise and it helps learners to calm down. They are less energetic and then they will be able to focus more. **Teacher FGD***

Teachers describe BLP as having a positive impact on their own wellbeing. This includes teachers using BLP exercises to manage stress, as well as an overall improved understanding of their own psychosocial needs.

Education actors note that with improved teacher wellbeing, as described above, comes an increased ability for teachers to do their job effectively. This positive impact of BLP means that their teaching improves, as well as their ability to provide adequate and appropriate support to their learners social emotional needs.

Education actors, learners, and caregivers note that children bring the BLP activities home, which has a positive impact on family and the community beyond the school.

As currently implemented, many BLP activities and exercises are not inclusive for learners who have particular requirements, such as learners with disabilities. Education actors—especially teachers and school administration— described how it was often impossible to adapt certain activities to be inclusive to all students in their classrooms.

As currently implemented, BLP is often not perceived by learners as applicable to older adolescents and youth, despite there being frequent overage learners in BLP classrooms.

There are a number of school or classroom level challenges to the successful implementation and positive impact of BLP across the research locations. These include severely overcrowded classrooms, multiple languages and ages of learners in classrooms, and insufficient learning materials and resources.

There are challenges to effectively supporting and maintaining the BLP teacher workforce, and high rates of teacher turnover.

BLP is not a standalone program and is intended to be integrated into other programming and lessons; but there are challenges to doing so effectively, including overall messaging about what exactly BLP is and what it requires of teachers and schools.

NRC's current sustainability strategy aims at the institutionalization of BLP into the formal education system, with adoption by the Ministry of Education and eventual integration into all schools in Kenya, not just those targeting refugee learners. This was an ongoing process at the time of this research.



Call to action

To effectively implement MHPSS programs such as BLP, implementers should focus on creating standardized approaches with the flexibility to adapt to regional and cultural nuances. This calls for the development of contextualization tools to address unique local needs, as evidenced by the BLP implementation in Kakuma. BLP offers important examples of openness and support of programming to such contextualization, which other implementers of MHPSS programming could learn from.

Additionally, advocating for the integration of MHPSS into national curricula, training, and policies is crucial to ensure continuity and sustainability. NRC's work with the Kenya Ministry of Education to institutionalize BLP as the country's select SEL approach offers notable opportunity to learn about such processes, and should be further explored and learned from. Implementers are urged to document and share best practices, lessons learned, and case studies to build capacity and facilitate knowledge exchange both on a national and global scale. While mental health of children is often reflected in national education policies, refugee-specific policy for education, health, and mental health are still lacking. Additionally, the financial and political commitment required to assure that MHPSS policy translates to action at the school level should be encouraged for all children.

Recognizing the value of local knowledge is essential; programs should be led or co-led by local entities to ensure cultural relevance. This assures adherence with the localization agenda of many I/NGOs in humanitarian contexts. By integrating local partners and leaders early in implementation—including programs designed or co-designed by local or national actors—such knowledge and leadership can inform implementation across the program cycle and beyond.

Furthermore, a focus on sustainable models is vital, including the integration of MHPSS into teacher training and linkage to national risk management plans with cascading models. Interdisciplinary collaboration is key, as MHPSS intersects with education, health, and social work.

Lastly, a context-sensitive approach is crucial for effective implementation. This involves understanding the specific challenges, needs, and capacities of each community. Ensuring safety, both emotional and physical, is foundational for MHPSS interventions. This includes creating safe environments in schools, providing secure transportation, and fostering relational safety. Cultural sensitivity and contextualization should be integrated into program planning, adapting to local beliefs and practices, and addressing logistical challenges for dynamic refugee populations.

The recommendations included in this report aim to optimize the impact and sustainability of MHPSS programs, emphasizing the need for standardized yet flexible approaches; policy integration; local knowledge utilization; and a context-sensitive, safety-focused implementation strategy.

References

- [i] UNHCR. (2022a). Global Trends Report 2022. Geneva: UNHCR. Retrieved from <https://www.unhcr.org/global-trends-report-2022>
- [ii] Hou WK, Liu H, Liang L, Ho J, Kim H, Seong E, et al. (2020). Everyday life experiences and mental health among conflict-affected forced migrants: A meta-analysis. *Journal of affective disorders*. 2020;264:50-68.
- [iii] UNHCR. (2022b). Strengthening Mental Health and Psychosocial Support in UNHCR: Achievements in 2021 and priorities for 2022 and beyond. Geneva: UNHCR. Retrieved from: <https://www.unhcr.org/us/media/strengthening-mental-health-and-psychosocial-support-unhcr-achievements-2021-and-priorities>
- [iv] UNICEF. (2019). Every Child Learns: UNICEF Education Strategy 2019-2030. New York: UNICEF. Retrieved from: <https://www.unicef.org/reports/UNICEF-education-strategy-2019-2030>
- [v] Aber, J. L., Tubbs Dolan, C., Kim, H. Y., & Brown, L. (2021). Children's Learning and Development in Conflict- and Crisis-affected Countries: Building a Science for Action. *Development and Psychopathology*, 1-16. Epub 2021/01/07. doi: 10.1017/s0954579420001789. PubMed PMID: 33402231.
- [vi] INEE. (2020). 20 Years of INEE: Achievements and Challenges in Education in Emergencies. New York, NY.
- [vii] Aber et al, 2021.
- [viii] UNHCR Kenya. (2023). Kenya: Registered Refugees and Asylum-seekers as of 30 September 2023. UNHCR Kenya – DIMA Unit. Retrieved from: <https://www.unhcr.org/ke/wp-content/uploads/sites/2/2023/10/Kenya-Statistics-Package-September-2023.pdf>.
- [ix] Ibid.
- [x] Walker, L. (2023). Learning is a Lifeline: Access to Education for Refugee Children in Kenya. U.S. Committee for Refugees and Immigrants. Retrieved from: <https://refugees.org/learning-is-a-lifeline-access-to-education-for-refugee-children-in-kenya/>
- [xi] WHO. (n.d.a). Refugee and Migrant Health. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/refugee-and-migrant-health>
- [xii] WHO. (n.d.b). Mental Health and Forced Displacement. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-and-forced-displacement>