

Summary

Mental health and psychosocial well-being is life-saving for children, youth, their families and their communities and essential to the peace and prosperity of societies. The composite term *mental health and psychosocial support* (MHPSS) refers to all multilevel interventions and continuum of care that aim to protect or promote psychosocial well-being and/or treat or prevent mental disorders. In addition to the direct provision of services and strengthening of national and community systems, MHPSS also encompasses the establishment of coordination mechanisms that integrate MHPSS into cross-sectoral programs and approaches and strengthen the MHPSS capacity of humanitarian staff.

Promoting mental health and psychosocial well-being is a target of **Sustainable Development Goal** (**SDG**) **3:** Good health and well-being for all at all ages. Ensuring equitable and sustainable access to quality MHPSS for children and families is especially challenging in contexts affected by conflict, disasters, violence, and other crises and adversity. Joint strategies and collaborative action between multilevel MHPSS stakeholders in nations that share a common vision is absolutely imperative to achieve lasting improvements for even the most marginalized

Recognizing the need for meaningful, collaborative approaches and solidarity, a Steering Committee now including the Danish Red Cross, International Children's Development Program Norway, the IFRC Reference Centre for Psychosocial Support, MHPSS Collaborative, Save the Children Denmark, War Child Sweden devised the plans for "A Human Right Left Behind: A Nordic Conference on MHPSS in Fragile and Humanitarian Settings." The conference will be co-hosted by the Danish Ministry of Foreign Affairs and Danish Red Cross on 29 and 30 August 2022, in Copenhagen.

This inaugural conference aims to achieve three main outcomes:



1) Nordic Network on MHPSS Launch



2) 2022-2030 Joint Nordic Roadmap on MHPSS in Humanitarian Settings



3) Copenhagen Declaration on Prioritizing MHPSS in Humanitarian Action

The conference will be organized around **five themes** or "working tracks" that form the current and emerging foundation of MHPSS in terms of its programs and approaches:



1) Localizing and strengthening MHPSS systems



4) Cross-sectoral integration/coordination mechanisms



2) Direct MHPSS interventions



5) Innovative approaches



3) Child-, youth-, and caregiver-focused MHPSS

Tracks will comprise of one plenary session followed by five concurrent breakout sessions to discuss and make recommendations that will be included in the roadmap. The breakouts will primarily cover five **priority areas and entry points** in MHPSS strategies and approaches:





BACKGROUND & RATIONALE

Mental health and psychosocial well-being are essential to secure the overall health and quality of life of children, youth, their families and communities, as well as for the peace and prosperity of our societies. Mental health promotion is closely linked to the 2030 Agenda for Sustainable Development, particularly Goal 3: Good health and well-being for all, at all ages. There is also a strong association mental health and poverty resulting from the inadequate realization of human rights, such as the right to work in just and favorable conditions, the right to social protection, the right to physical and mental health, and the right to education and cultural freedom.

Neglecting mental health and psychosocial needs has severe immediate and long-term implications, particularly for children and youth in stressful and adverse circumstances without access to support. The composite term MHPSS explicitly addresses the protection and promotion of mental health and psychosocial well-being, as well as the prevention and treatment of mental disorders. From familyfocused and prenatal MHPSS before birth, to focused and more specialized care for children, youth, and adults of any age, gender, and culture, everyone should have the right to effective and appropriate MHPSS across the life course.

MHPSS has been increasingly integrated in humanitarian response through the direct implementation of services, strengthening of national and community-based systems, and mainstreaming across all humanitarian response and sectors. Several sectors - for instance, protection, education, and health - even see MHPSS as a core component of their programs and strategies and have dedicated MHPSS technical advisors and practitioners. Still, MHPSS is not viewed as a priority equally by everyone and stakeholders in each country, sector, or industry continue to be at different stages of prioritization.

The need to focus on children, youth, and caregivers in humanitarian settings

Millions of people around the world live in communities affected by conflict, violence, poverty, climate change, displacement and other sudden and protracted crises. Of those, more than 420 are children and adolescents – about one in five of all children – live in conflict zones and are exposed to violence, loss, uncertainty, and displacement. Moreover, an estimated 10-20% of young people struggle with mental health and illness; half of which occur by the age of 14 and three-quarters by the age of 24.2

Humanitarian crises have a significant, adverse effect on the development and well-being of children and youth directly and directly. In addition to direct exposure to violence, loss, and other distressing circumstances, crises commonly disrupt the delivery of needed services, upend the social fabric and support systems of entire families, communities, and societies, and bring about a host of other daily stressors.³ Failing to address mental health and psychosocial needs resulting from crises early and throughout the life-course can have detrimental implications for children and their caregivers in the short- and long-term. For instance, there is a growing evidence base on how early and prolonged exposure to stress and adversity without adequate support can result in a phenomenon called "toxic stress."4 If left untreated, toxic stress has been linked to increased risk of mental disorders, chronic health conditions, socialization and behavioral issues, substance-related disorders, and learning and earning potential, emphasizing the importance of early and life-course intervention and prevention. The individual and societal consequences of crises are largely exacerbated by structural inequity and inequality, oppression, discrimination, and racism.

https://www.globalgoals.org/goals/3-good-health-and-well-being/

² Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. (2005), Lifetime Prevalence and Age-of- Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. Archives of General Psychiatry, 62 (6) pp. 593-602.

³ Anna Orrnert (2019). "Implications of Not Addressing Mental Health and Psychosocial Support (MHPSS) Needs in Conflict Situations." K4D,

Knowledge, Evidence, and Learning for Development

⁴ Save the Children (2019), Road to recovery: Responding to children's mental health in conflict.

Since 2020, the COVID-19 pandemic has also illuminated the perennial underinvestment in mental health and social services in high- and lower-income countries alike. It has become more apparent that while young people demonstrate resilience during the most extreme crises and adversity, children and youth who receive support from their caregivers, extended families, and communities have the best outcomes in mental health and psychosocial well-being, physical health, education, and economic productivity. Thus, investing in child- and family-focused MHPSS across the life course through cross-sectoral and community approaches is critical to prevent lasting consequences on development, health, and learning and enable individual and societal resilience and recovery.

Lack of sufficient financing and governance

Securing the mental health and psychosocial well-being and resilience of children, youth, families, and communities in fragile and humanitarian settings depends on the continuation of long-term and strategic investments and policies. While there have been modest increases in the aid available for MHPSS, funding has not been commensurate to increases in aid for other health conditions. In fact, only 0.31% of all international aid for health is spent on child- and family-focused MHPSS. Likewise, only 0.14% of global assistance to fragile and humanitarian settings is dedicated to supporting the mental health and psychosocial well-being of children, youth, and caregivers.⁵

Although solutions exist, convenient, cost-effective, and evidence-based MHPSS approaches are not implemented or scaled to the extent needed to ensure equitable access to quality MHPSS globally, but particularly in LMICs with serious financial and human resource limitations. For example, LMICs, allocate less than 2% of their national health budgets to mental health and MHPSS on average, even though experts suggest earmarking no less than 5%.6 Moreover, this deficit is arguably the gravest in crisis-affected communities that need the highest level of resources and support, but do not have access to sufficient or reliable funds from their own governments or international donors.

In addition to funding, ensuring sustainable access to quality MHPSS requires a sizable number of staff trained in MHPSS at a global, regional, and local level as well as public officials committed to prioritizing MHPSS in their humanitarian and development strategies. However, the humanitarian workforce has long lacked capacity in MHPSS, while most countries (including Nordic ones) have not yet included mental health and psychosocial well-being or MHPSS in their nexus policies. Without explicit dedication to investing in financial and human resources, there will continue to be insufficient and ineffective services, systems, and coordination mechanisms. This will likely result in more unmet needs and targets related to mental health and psychosocial well-being in addition to poor outcomes among cross-sectoral programs that rely on the integration of evidence-based MHPSS approaches.

Global and Nordic Milestones

A number of landmark reports and resolutions intending to rectify insufficient capacity and resources have been introduced and endorsed by global MHPSS stakeholders in recent years. For instance, the UN Secretary General, Antonio Guterres, highlighted the decades of neglect and underinvestment in mental health and called for ambitious commitments from each country in his 2020 address marking the release of the UN Policy Brief "COVID-19 and the Need for Action on Mental Health." Similarly, UNICEF's 2021 State of the World's Children report underscores the global obligation to address the unmet mental health and psychosocial needs of children, youth, and families in crisis-stricken LMICs.

The Nordic-based ministries have made MHPSS central to their humanitarian and development strategies. The Norwegian Ministry of Foreign Affairs and Ministry of Health and Care Services have instituted a landmark strategy for 2020-2024 to prevent and control non-communicable diseases

MHPSS Collaborative and Save the Children Denmark, "The Funding Gap for Child and Family Mental Health and Wellbeing," Policy Brief.
 MHPSS Collaborative (2021), Follow the money: Global funding of child and family MHPSS activities in development and humanitarian assistance. ⁷ Antonio Guterres (2020), COVID-19 and the Need for Action on Mental Health, UN Policy Brief.

(NCDs) in low-income countries that includes mental health care as a core pilar. Denmark and the Netherlands launched the Copenhagen 2020 Action Plan for Child, Youth and Family MHPSS, which includes recommendations inspire global action and improve child- and family-focused MHPSS.9 The Swedish government has also been a pioneer in their support for MHPSS, notably signing three UN Humanitarian Aid Resolutions about MHPSS.¹⁰ In addition, Sida, in partnership with the Royal Tropical Institute of Sweden, published an influential report "Mental Health and Psychosocial Support - Brief" that provides global guidance and evidence for MHPSS.¹¹

These milestones demonstrate the sector's increased recognition of the short-and long-term impacts of crisis on children, families, and communities and the subsequent need to improve and ensure access to quality child-, youth-, and caregiver-MHPSS in crisis-affected settings. This support does not only span Nordic-based ministries, it's also visible across the priorities and strategies of donors, both private and institutional, which have augmented support for MHPSS programs and investing in cutting-edge, innovative approaches. Given the emphasis on MHPSS by the government, public, private sectors, it is crucial that Nordic stakeholders and actors continue this momentum and boldly defend and secure the fundamental human right to mental health and psychosocial well-being.

OBJECTIVES

In order to solidify MHPSS as a priority concern and strategic area in all humanitarian response and address the urgent need to increase children and families' access to quality MHPSS in crisis-affected contexts, this inaugural conference in Copenhagen strives to achieve three outcomes:



1) Official Launch of Nordic Network on MHPSS

- A hub to exchange ideas, findings, and learnings, find inspiration, and form vital partnerships with others from their country and the entire region.
- Reflection of the transdisciplinary nature of MHPSS, by including stakeholders from different humanitarian sectors, disciplinary backgrounds, and industries.
- The first regional, transdisciplinary network of its kind, ensuring this conference will establish a new precedent for regional and global cooperation necessary to achieve the Nordic region's collective objectives and long-term impact.
- Network members will organize breakouts and speakers during plenary to exchange learnings, make informed suggestions, and inspire new partnerships and joint action strategies based on their unique and collective strengths, capacity, and gaps.
- The regional network will have an opportunity to convene annually, rotating between in-person and virtually, to continue assessing progress and adapting any formal or informal goals and commitments.

⁸ Ministry of Foreign Affairs and Ministry of Health and Care Services, "Better Help, Better Lives: Combating Non-Communicable Diseases in the Context of Norwegian Development Policy. https://www.regieringen.no/contentassets/1801e33462824cdbbcdcdb49ddf519b6/better-health-betterves-norwayss-ncd-strategy.pdf

⁹ Save the Children Denmark and the MHPSS Collaborative (2020), "Copenhagen 2020 Action Plan for Child, Youth and Family MHPSS." https://redbarnet.dk/mhpss-conference/actions-

¹⁰ International Committee of the Red Cross and United Nations (2019), "Humanitarian Aid Resolution."

https://rcrcconference.org/app/uploads/2019/05/addressing-mental-health.pdf.

11 B. Tolboom, L. Juanola, M. Dieleman, M. van Duijl (2020), "Mental health and psychosocial – brief," Swedish International Development Cooperation Agency. https://www.kit.nl/publication/mental-health-and-psychologicalian-psych



2) 2022-2030 joint Nordic Road Map on MHPSS in Fragile and Humanitarian Settings

- A "living" document that catalogs recommendations envisaged and endorsed by conference delegates during breakout sessions to inspire and inform current or new projects, programs, or strategies.
- The confluence of perspectives, learnings, and findings from multi-level and transdisciplinary stakeholders in and outside the Nordic-region to ensure a robust humanitarian strategy on MHPSS, shared by all Nordic stakeholders, that focuses on the needs and rights of children, youth, their families, and their communities.
- Guidance for strategic and transdisciplinary partnerships between multilevel and crosssectoral MHPSS and humanitarian stakeholders across the Nordic region according to each partner's unique and collective strengths, capacity, resources, and gaps.
- The recommendations will follow from the conference tracks, highlighting ways to improve MHPSS from a variety of vantage points, including but not limited to systems, services, coordination and integration, innovation, all while paying heed to engaging young and affected people in the decisions being made.
- Endeavors to enhance the global visibility of MHPSS as a principle, cross-sectoral pillar
 of humanitarian action and bolster the influence and efficacy of Nordic-based MHPSS
 stakeholders and actors in crisis-affected settings.



3) Copenhagen Declaration on Prioritizing MHPSS in Nordic-driven Humanitarian Action

- An agreement contained in the preamble of the roadmap that has been committed to by each participating ministry – and civil society representatives – to prioritize MHPSS in its humanitarian strategies.
- Recognizes MHPSS as a cross-cutting issue that is key to achieving outcomes and impact in all sectors from education, protection, health, and so on in addition to being a priority concern deserving of dedicated attention in its own right.
- Does not involve mandated actions, indicators, targets, or financial commitments, only a statement of consensus towards the need for Nordic countries to work together on MHPSS to achieve its collective objectives.
- Endorses and supports the formation and launch of the Nordic Network, while looking towards the roadmap for inspiration.

The Nordic Network on MHPSS will "live" on the Webex platform used for this first conference through April 2023. This first year trial run will be used to determine whether the platform will be conductive as a home for the network in addition to the event planning and coordination components of the conference, or whether we need to raise funds and source elsewhere for a home for the network. This will be decided in early 2023.

STAKEHOLDERS

Government representatives and policymakers

- DANIDA + Danish MFA
- Finnish MFA
- Norad + Norwegian MFA
- Sida + Swedish MFA
- · Swedish Ministry of Health and Social Affairs

Private sector foundations

- Care about the Children
 Education Cannot Wait
- Grieg Foundation
- IKEA Foundation
- LEGO Foundation
- Kavlifoundation
- Tim Bergling Foundation

UN agencies and institutional donors

- UNICEF
- WHO
- UNFPA
- IOM
- · and many more

Youth organizations

- Danish Red Cross Youth
- Mental Health Youth Norway
- and more...

Academia and research institutions

- København University
- Karolinska Institutet
- University of Bergen
 University of Tromsø
- Tufts University
- Johns Hopkins University
- Kings College London

NGO and civil society representatives

- ICDP
- IFRC
- Save the Children
- War Child
- MHPSS Collaborative
- ADRA
- SOS Children's Villages
- ACT Alliance
- DIGNITY
- MSF
- And many more...



Youth Advisory Committee

- The youth advisory committee will comprise of about ten youth five based in Nordic countries, five overseas, all 18-years or older and fluent in English who are leaders and advocates regarding their experience living in crisis and adversity.
- The participants will be members of youth organizations associated with organizations involved with the conference, for instance, the MHPSS Collaborative, Danish Red Cross Youth, War Child Sweden, UNICEF Sweden, and Mental Health Youth Norway.
- They will participate one monthly meeting to provide their own advice and perspectives to the conference tracks, organize and film one or two videos to be displayed at the conference, and co-develop and facilitate the breakout session on youth engagement in Track 3.
- The youth advisors will also have the opportunity to present during the State of the World during the opening ceremony as well as the recommendations they came up with during the pre-conference workshop during the closing ceremony. The
- Their recommendations will also be included and highlighted in the Nordic Roadmap.

CONFERENCE ARCHITECTURE

The conference will take place on 29-30 August – the last Monday and Tuesday of August. In regards to timing, Day 1 will go from 9:00 to 17:30, and Day 2 from 9:00 to 17:00, followed by a reception. Longer refreshment breaks and themed lunch meetings will offer spaces to network, as will many features on the event platform app. The conference is organized around five thematic tracks that correspond to five overarching MHPSS program and focus areas (see below). A track is comprised

of one plenary session that all conference guests attend, followed by five concurrent, discussion-based breakout sessions. **Annex A** contains the program overview.

TRACK THEMES

The conference will be organized around five core programmatic areas or "tracks" in MHPSS work:



1) Localizing and strengthening systems

• Strengthening multi-level MHPSS systems, structures, and capacity, with an emphasis on localization and community engagement.



2) Direct interventions

• Highlighting and unpacking current, new, and emerging evidence and trends in practice and research on multilevel interventions in emergencies.



3) Child-, youth-, and caregiver-focused programs

 Supporting children and youth growing up with multiple adversities by embracing a holistic, life course approach to mental health and psychosocial well-being and resilience in humanitarian action.



4) Cross-sectoral integration and coordination mechanisms

 Underscoring the value of and mechanisms for mainstreaming MHPSS across all sectors and stages of humanitarian response.



5) Innovative approaches

• Imagining and re-imagining what innovation is and innovative approaches entail in the context of MHPSS and humanitarian response.

Each of these tracks will kick off with a panel of speakers with expertise in the corresponding MHPSS program area in fragile and humanitarian settings. After the plenary session, participants will break out into small groups that will think critically and discuss five complementary, cross-cutting topics that showcase MHPSS "in context" and represent the main priorities of multi-level stakeholders.



1) Education

 Including strengthening MHPSS systems in schools, education in emergencies (EiE), digital education for displaced children, integration in early childhood development (ECD) programs, piloting innovation in education, and more.



2) GBV

 Including MHPSS interventions for GBV survivors, strengthening of (mental) health systems to respond and prevent GBV, sexual and reproductive health and rights (SHRH), mental health and psychosocial implications of coming of age, MHPSS and GBV coordination in humanitarian settings, and more.



3) Migration and displacement

• Including psychosocial support for migrants, engagement of displaced youth in MHPSS, local leadership in migrant and displaced communities, climate adaptation and disaster response coordination, and more.



4) Community-based practices and leadership

• Including strengthening and mobilizing community-based systems, faith-based approaches, caregiver programs, MHPSS advocacy and humanitarian diplomacy, cocreation and scaling-up of innovative solutions, and more.



5) Workforce capacity strengthening and training

• Including strengthening workforce capacity during conflict, psychological first aid (PFA) training for frontline staff, the adapting and scaling solutions, and more.

Representatives from Nordic countries in civil society, academia, UN agencies, and the private sector – or partners who work closely with Nordic-based stakeholders- will help design and facilitate each breakout to capture a myriad of perspectives and priorities that stimulate critical thinking and mutual understanding and learning. As such, the outputs from each breakout will be reflected in the roadmap's cataloged recommendations in the roadmap.

FUTURE PLANS

This conference will be the first event in a series, with the other Nordic countries being willing to trade off hosting and carrying the brunt of planning for future ones as well. The more specific details of future events will be decided by the other Nordic countries and stakeholders who agree to host based on their capacity, resources, and outcomes. Nevertheless, the organizers' goal is to convene the Nordic Network on MHPSS officially launched during this inaugural conference in Copenhagen on an annual basis, for at least eight years as stipulated by the 2022-2030 roadmap timeline.

Though the details are still to be collaboratively determined, the current thinking has been for the regional Nordic Network to convene *biennially* at an in-person conference hosted on a rotating basis by each Nordic country. The regional Nordic network may also be able to meet virtually during alternating years, with potentially unique or synchronized in-person meetings for network members in each respective country.

The more immediate future details will be determined in consultation with the roadmap drafting committee and steering committee organizers, with advice from the members of the advisory group and Nordic government representatives over the next few months. Regardless, this conference marks the very beginning of a process and movement that will continue to exist and grow for years

DAY 1: AGENDA (09:00-17:30)

Date: 29 August 2022

Location: Eigtvelds Pakhus

Nordic Conference on MHPSS in Fragile and Humanitarian Settings

Copenhagen, Denmark

08:00 - 09:00	Check-in and light breakfast	Front room
09:00 – 10:15	Opening Ceremony Welcome Address Keynote Speaker Opening Panel on State of the World and MHPSS Milestones	Level 2, Room II
10:45 – 11:35	Panel Discussion: Localizing and Strengthening MHPSS Systems Multi-level systems strengthening: Community and national engagement and entry points	Level 2, Room II
11:45 – 12:30	Breakouts: Localizing and Strengthening MHPSS Systems "It starts in the classroom" – The right to well-being The invisible: Boys and men exposed to sexual gender-based violence – how can we provide psychosocial support? MHPSS in migration: Challenges and best practices How to build a national system from scratch? – MHPSS in Nepal after the 2015 earthquake MHPSS system-strengthening: The role and value of investing in staff and volunteer capacity "Our well-being matters too" – MHPSS for frontline staff and first responders	Various locations
12:30-13:30	Lunch	
13:30 – 14:20	Fireside chat: MHPSS interventions Current, new, and emerging evidence and trends in practice and research on multi-level interventions in emergencies	Level 2, Room II

14:30 – 15:15 Breakouts: MHPSS Interventions

Various locations

Education in emergencies (EiE) and MHPSS

Survivor-centered MHPSS: Applying a human rightsbased approach and gender lens for providing MHPSS to survivors of GBV

Leave no one behind: MHPSS for migrants in emergencies

Faith-sensitive psychosocial approaches in humanitarian emergencies

Building and sustaining MHPSS in fragile and humanitarian contexts: Training and supporting nonspecialist providers

Scaling up effective MHPSS interventions within a large federation

15:45 – 16:35 Panel Discussion: Child-, Youth-, and Caregiver-focused MHPSS

Level 2, Room II

Children and youth growing up in multiple adversities: A holistic approach to well-being and resilience in humanitarian action

16:45 – 17:30 Breakouts: Child-, Youth-, and Caregiver-focused MHPSS

Various

Digital education for people on the move

From girlhood to womanhood: MHPSS implications

Adolescent and youth participation in MHPSS services in fragile settings – Why and How!

"If you pay attention to the beginning, you can change the whole story" – Putting caregivers at the center of MHPSS

A feminist approach to MHPSS? – Intersections between and implications of Sweden's Feminist Foreign Policy on MHPSS

Climate change impacts on the mental health of young people: A neglected aftershock

18:30-20:30 After hours networking: Dinner and drinks at Reffen – Copenhagen Street Food

Refshalevej 167 Unit A

DAY 2: AGENDA (09:00-16:30)

Date: 30 August 2022

Location: Eigtvelds Pakhus

Nordic Conference on MHPSS in Fragile and Humanitarian Settings

Copenhagen, Denmark

08:00 - 09:00	Check-in and light breakfast	Front room
09:00 – 10:15	Panel discussion: Cross-sectoral integration and coordination	Level 2, Room II
	MHPSS mainstreaming and coordination	
10:15 – 11:00	Breakout rooms: Cross-sectoral integration and coordination	Various locations
	Research-based evidence on MHPSS in education in emergencies	
	MHPSS integration into GBV and SRHR programs	
	MHPSS in disaster response and climate adaptation	
	MHPSS advocacy and humanitarian diplomacy	
	MHPSS in early childhood development and nutrition	
	The political economy of MHPSS	
11:30– 12:20	Panel Discussion: Innovative Approaches	Level 2, Room II
	Innovation and innovative approaches in MHPSS	20001 2, ROOM II
12:30 – 13:15	Breakouts: Innovative Approaches	Various locations
	Piloting innovation in education and MHPSS	
	Building evidence through innovative collaboration	
	Funding innovative approaches in the context of displacement and crisis settings	
	From lived experience to disruptive storytelling: An innovative approach to facing mental health stigma	
	Scaling-up MHPSS innovation	
	Healing through play: Equipping play facilitators with basic psychosocial support skills	
13:15 – 14:15	Lunch	
	Ministers' Lunch	
	Donor Coordination Lunch	

14:15 – 15:15	High-level Segment Youth Advisory Committee Remarks Ministers' Panel	Level 2, Room II
15:45- 16:30	Closing Ceremony	Level 2, Room II
16:30-18:30	Reception	Level 2, Atrium