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Forced migrant youth in transit: data gaps, mental health needs, and approaches to psychosocial support¹

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Abstract

This chapter discusses key considerations in assessing and addressing the mental health needs of forced migrant adolescents. Forced migrants in transit are identified as a population distinct from refugees, labour and social migrants, resettled migrants, and other categories of migrants.

Emphasis is placed on the need for disaggregated data specifically about forced migrants and about youth in transit as a prerequisite for effective humanitarian assistance and human rights advocacy. The socio-emotional sequelae of forced migration are explored in terms of disrupted identity, belonging, and mental health, and the often oppressive, precarious, and risky circumstances of living on the move. The chapter underscores the need for more research on interventions to support the mental health of forced migrant youth in transit. Promising approaches are described that avoid the pitfalls of imposing Western-centric psychotherapeutic interventions without cultural adaptations and assessment of their effectiveness.

Keywords: mental health, forced migrant youth, migration research, refugee, psychosocial support, post-traumatic stress, humanitarian assistance

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Introduction

At the end of 2019, there were an estimated 79.5 million forcibly displaced people worldwide (United Nations High Commission for Refugees [UNHCR], 2019a). Based on a combination of different data sources (e.g., registration, surveys) and statistical models, the UNHCR (2019a) estimates that youth below the age of 18 comprise between 38 to 43 per cent (30 to 34 million) of this total population. Forced migrant youth in transit are a distinct population who are on the move, living liminally with authorized or unauthorized temporary stays in various countries before returning to their homeland, resettling in a new country, or assimilating into a country in which they are living in transit. This population is usually considered to include youth living in refugee camps, who represent a small minority of the total population of forced migrant youth in transit. It is widely known that the harrowing circumstances that lead youth and their families to flee their homes impact overall health and well-being (Masten et al., 2019; Meyer et al., 2019; Newnham et al., 2018). Forced migrant adolescents, in particular, have specific developmental risk and protective factors, shaped by the sociopolitical structures that lead them and their families to flee their homes and that determine access to key services within their displacement settings (Masten et al., 2019; Meyer et al., 2019; Motti Stefanidi, 2017; Ortiz-Eschevarria et al., 2017). Conflict and forced migration cause precipitous disconnections from family, community, and sociocultural networks that, in sedentary circumstances, are often protective for mental health and belonging. Yet the psychosocial and mental health needs of forced migrant youth in transit, especially during the formative adolescent years, are neither well understood nor addressed within humanitarian programming. Understanding how forced migration affects adolescent psychosocial well-being can inform health-promoting local and humanitarian programming that is sensitive to their developmental needs. Importantly, research in this area can also direct advocacy that is urgently needed to reform local policies and youth-centred international human rights legislation affecting structural conditions for forced migrants.

This chapter begins with an overview of youth migration trends, defines key concepts pertinent to the distinct population of forced migrant youth in transit, and describes the key sociopolitical determinants of migrants' well-being and access to supports. With this contextual understanding, the chapter reviews what is known about the mental health of forced migrant youth in transit, and the challenges to obtaining valid and reliable estimates of the prevalence and

nature of mental health disturbances. To gain insight about key contributors to forced migrant youths' mental health while in transit, the chapter then considers the processes of consolidating an identity and sense of belonging – processes that are particularly sensitive during adolescence and that are likely to be affected by the experience of forced migration. Promising approaches to psychosocial support for forced migrant youth while in transit are then described. The chapter concludes with a consideration of future directions for research, policy, international legislation, and humanitarian assistance.

Migration landscape

Environmental, economic, and geopolitical factors are pushing a record high of 271 million international migrants around the globe (Bhabha & Abel, 2020). Among these migrants, an estimated 79.5 million have been forcibly displaced, including an estimated 45.7 million who are internally displaced (IDPs, who remain within their home country), 26 million refugees (20.4 million with legal refugee status under UNHCR's mandate and 5.6 million Palestine refugees under UNRWA's mandate), and 4.2 million asylum-seekers (forced migrants living in transit and waiting for adjudication of their asylum application) (UNHCR, 2019a). Of the 79.5 million forced migrants around the world, 30 to 34 million are youth who have been displaced due to violence and conflict (UNHCR, 2019a). The points of departure for international forced migrants (living outside their country of origin) are mostly countries involved in armed conflict in Asia and Africa, including Syria, Venezuela, Afghanistan, South Sudan, and Myanmar (UNHCR, 2019a). Although youth are the second largest and fastest growing age group among migrants globally (UNHCR, 2019a), it is difficult to adequately characterize them due to the ways data are collected, and there is a lack of understanding about the specific needs of young migrants in different types of situations. The experiences, living conditions, and needs of young migrants has increasingly become a focus of concern for global policy leaders, child rights advocates, and humanitarian service organizations (UNHCR, 2017).

Key concepts

Forced migrants

Forced migrants are a distinctive category of migrant. Although forced migration is not a legal term and has been variously defined, generally this concept refers to displacement involving involuntary movement inside or outside of one's country of origin (International Organization for Migration [IOM], n.d). Forced migrants have fled their country due to armed

conflict, persecution, indefinite conscription into state and other armed forces, environmental disasters, famine, large-scale development projects, and other extreme ‘push’ factors (UNHCR, 2016). Central to understanding the problems, needs, and goals of forced migrants is the disaggregation of forced migrants from other populations on the move. Specifically, forced migrants differ from those who relocate for labour or employment reasons, social reasons (e.g., to reunite with family or seek a spouse), and for educational and vocational opportunities. These variants of migration may overlap or converge, as individual motives for migration may shift over the course of a sojourn away from home. What distinguishes labour, social, and educational migrants from forced migration is *choice*, with the impetus for forced migration being “force, compulsion, or coercion” (IOM, 2019).²

Many forced migrants register with the United Nations High Commission for Refugees (UNHCR) as asylum seekers, defined as “individuals who have sought international protection and whose claims for refugee status have not yet been determined” (UNHCR, n.d.). Over two million people registered as asylum-seekers in 2019 (UNHCR, 2019a). A small number of asylum applicants are legally confirmed as refugees who cannot return home (*non-refoulement*)³ and they are then placed on a waiting list for resettlement in a new country. In the last decade, roughly five million individuals received refugee or other protected status in 183 countries or territories because of their asylum claim. About 15 million more people received refugee or temporary protection status through groups procedures, for a total of 20 million people (UNHCR, 2019a).

Acknowledging the complexity of migration, the UNHCR (n.d.) defines persons in refugee-like situations to encompass “groups of persons who are outside their country or territory of origin and who face protection risks similar to those of refugees, but for whom refugee status has, for practical or other reasons, not been ascertained.” This applies to many forced migrant youth living temporarily in transit countries without the means or intent to submit a claim for

² This definition clarifies that “While not an international legal concept, this term has been used to describe the movements of refugees, displaced persons (including those displaced by disasters or development projects), and in some instances, victims of trafficking. At the international level, the use of this term is debated because of the widespread recognition that a continuum of agency exists rather than a voluntary/forced dichotomy and that it might undermine the existing legal international protection regime.” (IOM, 2019, n.d.)

³ The principle of non-refoulement asserts that a refugee should not be returned to a country where they face serious threats to their life or freedom. This is now considered a rule of customary international law. UNHCR serves as the guardian of the 1951 Convention (which is a treaty) and its 1967 Protocol. Signatory states are expected to cooperate with the UNHCR in ensuring that the rights of refugees are respected and protected.

asylum or while waiting for a decision on their asylum claim. Although forced migrants who cross borders are colloquially referred to as ‘refugees,’ the UNHCR (2016) does not include refugees in estimates of forced migration because the term ‘refugee’ is clearly defined under international and regional refugee law. States that have signed the 1951 United Nations Convention relating to the Status of Refugees and its 1967 Protocol have agreed to a specific set of legal obligations towards legal refugees, which do not pertain to other displaced populations (UNHCR, 2016).

It is estimated that about 86 per cent of forced migrants live in developing countries, often in the poorest and most inhospitable ones, which impacts their sense of belonging and impedes the possibility of reconstructing a positive identity and productive and fulfilling life (Bhabha, 2014). The amount of time that forced migrants live in exile and legally ‘on the move’ varies enormously depending on each political situation, crisis, and other factors. Only a fraction of the over 100 million forced migrants in the last decade have resolved their displacement (UNCHR, 2019a). An increasingly high number of forced migrant youth live in protracted displacement (i.e., five years or more without prospects for a resolution) (Evans et al., 2013).

Notwithstanding the immense challenges facing forced migrants, their experiences are not uniform. Constructing forced migrants as a homogenous group denies the meanings and implications of individual experiences and needs (Gartrell & Hak, 2017). The individual experiences of forced migrants are also shaped by the sociopolitical structures and policies that determine access to basic needs and key services within their particular displacement settings (Meyer et al., 2019). Thus, the distinct needs of different populations of forced migrants and different individual migrants are best understood by asking them directly and listening to their concerns, challenges, and goals.

Growing up on the move

Most forced migrant youth spend their years growing up with unabated uncertainty about whether they will ever be able to return safely to their home country or resettle in a new country (Evans et al, 2013). Many governments have articulated policies that apply to labour, social and education migrants regulating their access to employment, education, health care, social protection, housing, and prospects for integration. However, governments often lack policies or explicitly deny legitimacy or entitlements to forced migrants, particularly governments that have not signed international agreements that protect the rights of refugees, namely the 1951 United

Nations Convention relating to the Status of Refugees and its 1967 Protocol.⁴ As of 2020, there were 146 states party to the Convention and 147 states party to the Protocol. On top of lacking legal recognition from their temporary host countries, forced migrant youth may lack official identity documentation verifying their name, date of birth, and affiliation with a nation-state. This condition of growing up without official recognition of one's identity could be described as growing up in a state of 'liminality' (Ball & Moselle, 2016), referring to being intermediate between two or more states, conditions, or regions, or being suspended in a transitional space for an indeterminate amount of time.

The experiences of forced migrant adolescents in transit are only just beginning to receive attention within the research literature (Meyer et al., 2019; Ortiz-Eschevarria et al., 2017; Fincham, 2012). Most research has focused on youth with legal refugee status who have been resettled (e.g., Bennouna et al., 2019), or migrant youth in diasporic communities (i.e., members of ethnic communities who have established residence in a 'receiving' country, often legally and by choice) (e.g., Reynolds & Zontini, 2016). There is especially a dearth of studies of forced migrants in the Global South (Chakraborty & Thambiah, 2018). Assumptions about young migrants are largely based on the presumed generalizability of Euro-Western theories, beliefs, and values about how youth develop and what they need for their optimal development (Ball & Moselle, 2016; Boyden, 2013; Burman, 2016). Authorities making decisions about how to resolve the plight of young, forced migrants do not appear to question whether ideas about child and adolescent development and care apply equally to migrant youth in the Global South as they are assumed to apply to sedentary children in the Global North (Ball & Moselle, 2015). Global institutions, including international organizations, education bodies, and the media, tend to understand migrant children as passive agents who are dependent on parents, the state, and international organizations to determine their well-being and future. Policy makers tend to fall back on essentialized tropes of helpless and vulnerable refugee youth without agency or any semblance of empowerment (Boyden, 2013; Daniel, 2019; Ensor, 2010; Lynch, 2010; Wachter & Snyder, 2018). They are often seen as victims, and their experiences are often understood as

⁴ The 1951 Convention and the 1967 Protocol are deposited with the Secretary-General of the United Nations (Article 39 (1) of the 1951 Convention and Article V of the 1967 Protocol). For the authoritative source of the current status of both treaties, refer to the United National Treaty Collection website under status of Multilateral Treaties Deposited with the Secretary-General (MTDSG): <https://treaties.un.org/Pages/Treaties.aspx?id=5&subid=A&lang=en>.

secondary products of their parents' primary narratives of displacement (Beazley & Ball, 2017). Hegemonic Western-centric stereotypes of helpless refugee youth obscure youths' voices, opinions, and views on their displacement and what they need in order to survive and flourish (Ball & Moselle, 2015; Beazley & Ball, 2017). Accordingly, there is a pressing need for more studies to explore the migration experiences of youth, including their views on what they need to cope with the losses, challenges, and ambiguities they face, or the strategies they use to reduce the psychosocial toll of structural barriers, social stigma and hostility. Research on youths' own perspectives aligns with the goals and reports from high-level meetings that call for more engagement with youth and the use of youth-centred approaches (UNHCR, 2017). In 2014, United Nations Secretary-General Ban Ki Moon asserted that "the intersection of migration and youth remains a large, inadequately addressed challenge for governance in countries worldwide" (United Nations World Youth Report, 2014).

Data gaps and challenges to data gathering

Despite recent increased efforts to understand the socioemotional wellness of forced migrant adolescents in transit, there are several challenges with assessing constructs of wellness in this population (Vossoughi et al 2018). First, it is difficult to count people who are on the move, many of whom may not have had the opportunity or means to submit a claim for asylum to the UNHRCR or to register with another agency. Second, youth may be not registered by adults with whom they are traveling for several reasons, including that they are being trafficked, or they are not the youth's documented legal guardian. Youth may intentionally not register for their own reasons, such as preferring to avoid surveillance because they are seeking or engaging in unauthorized employment, or they are delaying becoming visible until they are in a preferred destination country. Third, as 'youth' is a socially constructed phenomenon that varies across historical and cultural contexts (Arnett Jensen, 2011; Robertson et al., 2017), studies differ in terms of how youth is defined. Oftentimes adolescents (i.e., 12-19 years old) are combined with other age groups (e.g., children under 21 years old) within research, exacerbating challenges with providing specific policies or guidelines because the group is undefined (Evans et al., 2013). Fourth, and most importantly, forced migrant youth are also rarely disaggregated from other categories of migrants including economic, social, and education migrants. The experiences of migration are different depending on the goals, means, and duration of the migration journey. Future studies of people on the move need to disaggregate children under 12 years old from

adolescents (12-19 years old) and from young people (20-29 years old). Although Western age-based theories of development are limited, childhood, adolescence, and young adulthood are partially shaped by distinct developmental processes that are embedded in broader social contexts. Migrants should also be disaggregated based on whether they are in transit or whether their migration journey has somehow been resolved, and based on their primary motive for moving (work, family, education, forcible displacement). Certainly, it can be said that forced migrant adolescents in transit face the most threats to their well-being and development of all migrant populations. The gap in demographic and other data (e.g., health, social, education) about forced migrants, and adolescents in particular, makes it difficult to advocate for their rights and needs (Evans et al., 2013).

Rights affecting socio-emotional development and wellness

Another factor that obscures an accurate profile of forced migrant youth in transit is that, in some data collection exercises, forced migrants are grouped together with youth who have been resettled, assimilated, or reintegrated. The experience of forced migration has been differentiated into three phases: pre-flight, flight, and resettlement (Carswell, 2011; Papadopoulos, 2001). Again, these categories can overlap, as some forced migrants may return to their home country and flee again, sometimes repeatedly, and some resettled migrants attempt to reintegrate, and so on. Mental health challenges are thought to vary across each of these phases (Lustig et al., 2004; Murray et al., 2010), with youth being more vulnerable to the negative impacts of all three phases compared to adults (Betancourt & Khan, 2008; Fazel & Stein, 2002; Hebebrand et al, 2016; Pfeiffer & Goldbeck, 2017; Siriwardhana, & Stewart, 2012; Villanueva O'Driscoll et al., 2017). Perhaps because it is easier to investigate youth who are settled rather than youth on the move, the preference of researchers to focus on resettled youth has left a gap in understanding the experiences, needs, and goals of forced migrant youth while they are in transit (Dowd, 2008). Youth living temporarily in a country, or literally being on the move, experience more extreme risks including the possibility of ongoing exposure to violence, exploitation, and discrimination, lack of access to basic needs including health care, decent housing and education, prolonged uncertainty about their future, and in many cases, separation from key sources of psychosocial support and belonging, including their family, friends, and cultural community.

The experiences of forced migrant youth in transit depend heavily upon the political laws and structural conditions of their temporary country of residence. Perhaps most importantly, there are considerable implications for a youth's well-being that depend on whether they reside in transit in a state that is signatory or non-signatory to the international agreements that protect rights for refugees and asylum seekers. As a case in point, Malaysia is a non-signatory state that denies forced migrants legal status. Therefore, they do not have rights to government-provided education, health services, or legal work on the same basis as Malaysian nationals (Razali et al., 2015). Migrant youth rely on donor-dependent non-formal education often run by their own refugee communities or non-government organizations that aim to compensate for denial of public services to refugee populations. While Malaysia's approach to refugee policy has occasionally made the process of arriving in the country easier for refugees and asylum-seekers, the government's refusal to grant legal recognition to forced migrants renders them extremely vulnerable to persecution by immigration officials, xenophobic violence, and exploitation at the hands of the landlords, the healthcare system, informal employers, and in some cases, organized crime (Towle, 2017). Forced migrants are always at risk of detention by immigration officials, leading to situations where bribery and exploitation of refugees are commonplace (Chao, 2014). Youth face perpetual risk of separation from caregivers and family due to detention, threats of imprisonment, and deportation for family members who work (Razali et al., 2015; UNHCR, 2019b).

The United Nations Convention on the Rights of the Child (UNCRC, 1989), to which all countries except the United States are signatory, constructs children as active participants in their own lives and states the necessity of ensuring the protection, survival, and development of all forcibly displaced children. Article 12 enshrines the right of children and youth to have a voice in decisions that affect them. Notwithstanding, this convention and other instruments that recognize the needs and rights of children offer only "soft laws" or benchmarks. They do not bind governments to protecting the rights of *all* youth. Thus, for example, migrant youth, particularly those accompanied by a caregiver who is presupposed to speak on their behalf, are often denied their right to a voice in deliberations about how to resolve their displacement. Without binding laws that enforce protections, including citizenship for all youth, forced migrant youth become effectively invisible (Doná & Veale, 2011).

Impacts of forced migration on mental health

While it is important to avoid stereotyped or homogenizing views of what forced migration means for youth, including for their mental health, it is reasonable to assume that the harsh circumstances that forced migrant youth navigate in transit, the loss of their usual sources of psychosocial support, and ongoing uncertainty contribute to psychosocial upheaval and trauma. Particularly in non-signatory states, forced migrant youth are often socially and politically marginalized (Committee for the Protection and Promotion of Children's Rights (CPPCR), 2009). Governments and humanitarian assistance agencies generally do not address the specific needs of adolescents, especially as they approach young adulthood (Evans et al., 2013). Their lives are often precarious and dependent on chance and their own resourcefulness, rather than on supportive policies or programs. These experiences are barriers to exploring identity, social belonging, and forming aspirations for the future – processes considered to be foundational for fostering positive psychological and developmental outcomes.

Separation from family members has been identified as a key stressor affecting the mental health of forced migrants and refugees in transit (Hodes et al., 2008). It has been argued that unaccompanied minors may be at greater risk for mental health disturbances because adult caregivers often help young people to self-regulate. However, many forced migrant adults are also known to exhibit symptoms of post-traumatic stress disorder (PTSD) and may communicate their stress, anxiety, and depression to their children, so that being in transit with adult caregivers, although beneficial in many ways, may not protect a youth from mental health disturbances. Forced migrants may also experience cultural bereavement from the loss of opportunities to practice their culture in everyday activities and on special occasions (Lustig et al., 2004).

Experiences living in refugee camps are also a key stressor affecting mental health. Refugee camps are meant to meet the basic needs of refugees. However, the living conditions and quality of care for minors in camps is often very sub-optimal and may include inadequate water supply, food, and medical care. Many youth experience gender-based violence, induction into criminal activities, and loss due to the suicide of other refugees (Fazel & Stein, 2002; IOM, 2017; United Nations World Youth Report, 2013; UNHCR, 2016).

Estimates of the prevalence of psychological distress among youth in refugee camps are as high as 87 per cent, with symptoms that are consistent with PTSD and other, often co-

occurring problems including suicidality, sleep disturbance, anxiety, and depression (Villanueva O'Driscoll et al. 2017; IOM, 2017; Vossoughi et al., 2018). Forced migrant youth, including youth in refugee camps, are often seen by migrant serving organizations as being at high risk for suicide, with prevalence estimates of suicidality ranging from five to 70 per cent across different populations and refugee camps (IOM, 2017; Vossoughi et al., 2018; United Nations World Youth Report, 2014; UNHROHC, 2016).

While the estimated high prevalence of mental health problems experienced by forced migrant youth is concerning, there are also significant criticisms regarding the predominance of Western methods and tools to assess mental health in non-Western populations (Salamanca-Buentello et al., 2020; Van Ommerman, 2003). The concepts, tools and intervention approaches that are mainstays of mental health practice in Western industrialized countries have been inappropriately exported around the globe without sufficient attention to cultural sensitivity, relevance, and validity with non-white and particularly marginalized populations (Watters, 2010; Kirmayer et al., 2014). For example, the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (DSM) has been widely used to classify expressions of psychological distress by people in widely varying cultures in highly diverse circumstances (Berthold et al., 2019; Latzman et al., 2016). Cross-cultural studies have shown poor reliability and validity for many of the diagnoses in the DSM (Marsella, 2020; Villanueva O'Driscoll et al., 2017). Pathologizing individuals in developing nations using Western standards of (ab)normality has been criticized for representing an extension of colonization and oppression by the West (Bhatia & Priya, 2018; Salamanca-Buentello et al., 2020). Yet, there has been little recognition by many organizations and practitioners working with forced migrant youth that methods and tools must be informed by the particular cultures, languages, and structural conditions of the youth in question (Marsella, 2010) and with consideration of historical, age-based, and gendered power dynamics (Pedersen et al., 2015). Thus, there is a need to understand how psychological distress is experienced and expressed in varying cultural and situational contexts, and what these expressions mean from the perspective of normative expectations within a particular culture (Chentsova-Dutton & Maercker, 2019; Pedersen et al., 2015; Villanueva O'Driscoll et al., 2017). Some investigators have argued that signs of clinically significant psychological distress may be common among people who have travelled from similar circumstances should be understood as a

social or collective trauma rather than only as indicators of an individual's mental health disorder (Pedersen, 2002).

Developing culturally specific measures of mental health, in partnership with local informants, can help to address some of these limitations, including by using local ways of expressing psychological distress (Gadeburg & Norredam, 2016). Examples of studies that have done this include the Child Psychosocial Protective Factors Scale (Sim et al., 2017) and the African Youth Psychosocial Assessment Instrument (Betancourt et al., 2014). However, all measures must be validated in each new context and used cautiously to avoid over-pathologizing normal responses to traumatic events or structural deprivations.

Determinants of mental health

Identity and belonging are key concepts in our understandings of psychological wellness and distress. Western theory holds that a central process during adolescence is exploring one's sense of oneself in relation to the social world, including interpersonal relationships, forms of engagement in civil society and, for some, identification with a nationality or ethnicity (Erikson, 1968; Berry et al., 2006; Yuen & Leung, 2019; Way & Rogers, 2015). Forced migration would seem to threaten core developmental processes of affirming an identity and sense of belonging (Motti-Stefanidi, 2015). In addition, there are a host of sociostructural determinants of mental health that affect forced migrant youth, including socioeconomic disparities and social exclusion (Marwani, 2014; CPPCR, 2009). Most forced migrant youth in transit have experienced political oppression and social discrimination in the lead up to migrating and continue to experience social injustices throughout their time in transit (CPPRC, 2009). Youths' perceptions of, and socioemotional responses to, sociopolitical injustice and adversity often shape their sense of identity, belonging, and overall well-being (Boyden, 2003; Bhatia, 2018; Way & Rogers, 2015).

Only a few studies have explored how forced migrant youth in transit have negotiated their identity and a sense of belonging (e.g., Bellino, 2018; Fincham, 2012). These studies suggest that youth may construct their identities by leveraging relational processes (e.g., family storytelling), connecting to national and ethnic ties (e.g., rehearsing national anthem), and imagining their futures (Bellino, 2018; Ball & Moselle, 2015, 2016; Fincham, 2012). In recent research with adolescent forced migrants living in Malaysia, youth negotiated serious challenges affecting their identity. They explained how being uprooted from everything they had known and living in a largely hostile environment as asylum seekers had caused them to question their sense

of who they were, their self-worth, and their ability to imagine their futures (Ball, 2020; Torok & Ball, 2021). Further research on how forced migrant youth construct their identities, attending to their perspectives of their past (pre-flight), current self, and imagined futures, can provide critical insights about how they position themselves in the world with respect to their values and beliefs about their own self-worth and agency.

Related to identity is having a sense of belonging, which is a crucial determinant of mental health, including for immigrant and refugee youth (Baumeister & Leary, 1995; Edge et al, 2014; Posselt et al., 2019). However, little is known about how forced migrant youth experience belonging while living in transit and the barriers to constructing belonging when living somewhere illegally (Jones & Krzyzanowski, 2011). Many forced migrant youth are unauthorized while in transit, especially when they first arrive and have not yet filed a claim for asylum. The few studies exploring the impacts of illegal status on the well-being of children and youth point to largely negative psychological and practical impacts (Suárez-Orozco et al., 2011).

Psychosocial Interventions for forced migrant youth

Humanitarian service organizations are not well equipped to support the developmental and mental health needs of forced migrant youth in transit (Harild, 2016) due to a paucity of research on psychosocial interventions for them. Most studies have focused on resettled youth (Castles, 2006; Fazel & Stein, 2002; Hebebrand et al., 2016; Martin et al., 2005; Siriwardhana & Stewart, 2012; The National Child Traumatic Stress Network, 2003). A few studies have focused on youth in refugee camps (e.g., Burck & Hughes, 2018), where there is often a rudimentary system for offering services to youth and for training staff. Yet, the larger proportion of forced migrant youth in transit do not have refugee status and do not live in designated camps. The gap in demographic, epidemiological, and psychosocial data about forced migrant youth is matched by a gap in reported and evaluated psychosocial support programs tailored to this liminal population.

Psychosocial interventions to assist youth to cope with traumatic experiences and ongoing difficult circumstances depend on a valid understanding of how mental health related concepts are understood within the youth's primary culture of reference (Hebebrand et al., 2016; Lustig et al, 2004; Murray et al., 2013; The National Child Traumatic Stress Network, 2003; Villanueva O'Driscoll et al., 2017). Yet, like approaches to mental health, many intervention approaches build on Western theory and research about adolescent psychological development,

mental health, and psychotherapy, which have been extensively critiqued for their limited view of the range of human experience and expression (Bhatia & Priya, 2018; Burman, 2016; Clayton et al., 2019; Pederson et al., 2015). ‘Best practices’ in Western interventions often lack applicability and feasibility in low resource settings, especially where there are significant cultural differences or where there has been mass trauma. Interventions conceived in the West are typically driven by individualistic values, including personal autonomy, expression, and achievement. This has contributed to a singular focus on problems while overlooking resilience, optimism, exploration of new opportunities, and pro-social behaviours.

Without preliminary field work and adaptations to ensure relevance, feasibility, and cultural appropriateness, most mainstream Western approaches to addressing mental health challenges are ill-fitted for forced migrants in low-resource, highly constrained contexts where sociopolitical determinants of trauma and collective social suffering are relevant (De Jong, 2011, Pederson 2002; Kleinman, 2010). Presuming that a Western ‘best practice’ will be meaningful to non-Western youth can deny their agency in choosing which forms of support are most likely to help (Ball et al., 1994; Beazley & Ball, 2017). Additionally, Western interventions typically depend on highly trained mental health professionals, limiting access to those with the ability to pay and creating ongoing dependency on external specialists to provide training. Psychosocial interventions for forced migrant youth must address the distinct sociopolitical context, local rituals and knowledge that support individual and community healing and contextualize youths’ strengths and difficulties within their sociocultural realities (Chentsova-Dutton & Andreas, 2019; Burck & Hughes, 2018; Pederson et al., 2015; Somasundaram & Sivayokan, 2013; Suarez, 2016).

How can we incorporate these premises into practice? One example is The Tree of Life intervention, which is a trauma-informed, culturally grounded therapeutic approach. Developed specifically for refugee youth, it uses the metaphor of trees and forests to involve youth in an expressive, narrative approach to therapy (Ncube, 2006). When used with youth in a refugee camp in France, the counsellors explicitly validated youth’s perceptions that sociocultural barriers such as racism and violence were key determinants of their mental health and well-being, rather than only exploring individual problems or validating only individual, psychological interpretations of distress (Burck & Hughes, 2018) Preliminary evidence from qualitative research suggests that it strengthens social connections among refugee youth (Jacobs,

2019). Another example is a photography intervention with youth in a refugee camp in Thailand that involved youth working in groups to photograph things that were important in their lives. This intervention focused on positive development and adjustment following traumatic experiences. The researchers found that the health-promoting component of this method consisted of youth articulating a ‘social narrative’ or story of the survival of their community (Prag & Vogel, 2013). This approach starts with an understanding of trauma and resilience as a collective experience, moving away from the mainstream Western individualistic approach. Another promising practice is the Peer Mediated Storyboard Narrative (PMSN) method

The PMSN was inspired by the need for a collective, trauma-informed approach to understanding the socioemotional experiences of forced migrant youth, while abiding concerns about the limitations of mainstream Western approaches (Ball, 2020). This approach was used with 52 forced migrant youth from the Middle East, North Africa, and Myanmar living in transit in Malaysia (Ball, 2020). The PMSN method is deliberately designed to appeal to and meet the needs of youth. Youth are asked to use expressive arts and personal storytelling to describe their experiences of migration in terms of how it impacts their sense of self, home, belonging, and future aspirations. They do this work in small groups of other forced migrant peers over several weekly sessions. Their narratives address both macro-level changes and conditions (i.e., forced migration, their legal status, interactions with the local ‘host’ community members and authorities) and micro-level changes (e.g., identity, sense of belonging, family life). From a displacement lens, this method creates space for youth to link their sense of self, wellness, and hope or despair with their circumstances.

As a trauma-informed approach, the PMSN method centres the perspectives of youth exposed to trauma, allowing them to define and describe their mental and emotional well-being on their own terms. While forced migration, structural violence, and discrimination are recognized as trauma stressors, youth are the arbiters of the extent to which they conceive of their migration experiences as traumatic (or not) at any given point in time. There is no reliance or valuing of Western standards of (ab)normal behaviour, as these constructs have not been validated with this population. Thus, youth may articulate their structural upheaval as a traumatic stressor and/or as an opportunity for growth and positive change. The PMSN method is youth-centered, youth-paced, and largely-youth driven, and it does not depend on ongoing expert consultations with mental health professionals.

The foregoing examples illustrate approaches that recognize displacement, poverty, and violence as ongoing structural conditions that contribute to trauma and recognize that mental health and social problems must be addressed in tandem. These approaches are primarily aimed at a micro-level, to promote self-insight, self-acceptance and peer support for psychosocial challenges, growth, and development. They do not intervene in the structural problems that continue to oppress forced migrant youth in transit. Nevertheless, in addition to meeting an immediate need to ‘do more’ for youth in transit, these approaches can generate insights about the conditions, needs and goals of forced migrant youth from their own perspectives. This information can be used to advocate for reform of local policies affecting the conditions for forced migrants, youth-centred international human rights legislations, and humanitarian programming.

Directions for future research

This review of current research across multiple disciplines underscores the need to deconstruct the prevalent image of forced migrant youth as passive victims of circumstances and develop the view, reflected in the UNCRC, that they are actively engaged in making meaning of their lived experiences and their identities (Ball & Moselle, 2016; Guerrero & Tinkler, 2010; Maguire, 2012). Regardless of how limited their room for maneuver may be, forced migrants have various areas of choice in terms of how to engage with their situation and alternative ways of making meaning of their experiences. The socio-emotional development, mental health and psychosocial needs should be explored within the context of their embeddedness in particular social, political, and historical situations and ongoing structural conditions. The urgency of this research cannot be overstated. As conflict migration numbers globally continue to grow, the negative impacts that forced migration can have on youth include a host of lifelong difficulties. This does not mean, however, that youth lack personal capacities for resilience and agency, and there may be strengths flowing from communal empathy and support. In the past decade, there has been more interest in forced migrant youth on the parts of researchers, some national governments, development agencies, and UNHCR. Going forward, a more youth-centric and holistic understanding of youths’ perspectives on their own migration journeys can yield insights about how to engage youth in finding strategies to support their socioemotional wellness, capacity for peer support, and ability to engage productively with their circumstances.

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