PSYCHOLOGICAL/EMOTIONAL ABUSE OR INFlicted DISTRESS

WHAT ACTS OR SITUATIONS CONSTITUTE THE PRESENCE OF THE RISK?

Psychological and emotional abuse or the infliction of distress can refer to direct acts perpetrated with the intention of causing harm, as well as the indirect results of the infliction of these types of mental or emotional pains or injuries. These include the presence of conditions that generate prolonged mental health and psychological well-being problems not addressed by State authorities, including not ensuring the availability of and accessibility to support systems. Conflict situations and humanitarian crises create an environment where a series of issues at individual, family, and community levels tend to generate new and exacerbate pre-existing mental health and psychosocial well-being problems and weaken the support systems usually available in normal circumstances. At the core of every conflict and humanitarian crisis, insecurity fractures social ties, breaks up families and communities, and displaces populations. This is compounded by traumatic experiences often involving loss of family members, participation in or witnessing of violent acts, or by the breakdown of social services such as health and education.

WHAT FACTORS MUST BE IDENTIFIED FOR MONITORING?

This type of protection risk can include threats of physical or sexual violence, intimidation, humiliation, forced isolation, stalking, verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, and others. Its monitoring relates to all psychological (such as emotions, thoughts, behaviours, knowledge and coping strategies) and psychosocial (such as interpersonal relationships and social connections, social resources, social norms, social values, social roles, community life, spiritual and religious life) harm and the presence of mental disorders. Particular attention must be paid to children since, due to their still sensitive neurological system, they are more susceptible to shocks to their development process. These shocks may include violent and traumatic events due to conflict or more indirect effects such as malnutrition leading to stunting and cognitive impairments. The mental health consequences of conflict and emergencies on children are clear, with elevated rates of post-traumatic stress, depression, and anxiety due to both direct exposure to traumatic events as well as exposure to increased levels of daily stressors.

WHAT INFORMATION & DATA CAN ILLUSTRATE THE PRESENCE OF THE RISK?

The identification of this protection risk starts with all available information coming from mental health and psychological support systems and partners, as well as specific monitoring carried out in the areas of child protection and gender-based violence. The available data and information support making the case for existing problems should be triangulated with any data and information illustrating either direct abuses or the absence of authorities’ measures and actions to address the stressors in the environment or to provide support systems. These can include support to people affected by rights violations, functional referral systems, accountability measures and networks, access processes for justice, address underlying conditions of violence, food insecurity or any other major driver of a humanitarian crisis, availability and accessibility to MHPSS services, regulatory or policy frameworks.