

Promoting physical activity for mental health in a refugee camp: the Skaramagas project

Manolis Adamakis  ^{1,2}

BACKGROUND

Many refugee and migrant children and adolescents are in urgent need of shelter, care and protection. Greece has been a major entry point in Europe, receiving over a million refugees and migrants (37% children) since the beginning of 2015. These children and their families face a range of risks, such as violence, exploitation and abuse in their country of origin, during their journey, and on arrival. It is estimated that 22% of individuals living in displacement experience a mental disorder such as depression, anxiety, post-traumatic stress disorder, bipolar disorder or schizophrenia.¹ Promising examples of community-based initiatives, which use culturally sensitive learning materials,² to encourage participation in physical activity for the purpose of promoting mental health are emerging.^{3,4} This Service Spotlight focuses on one such initiative: the Skaramagas project.

THE SKARAMAGAS PROJECT

Skaramagas is an old navy base located 11 km west of Athens. During the summer of 2016, Skaramagas accommodated 3000 refugees, of whom 96% were families from Syria, Iraq and Afghanistan. From November 2016 to May 2018, an educational programme sponsored by UNICEF and the British Council of Greece was created for refugee and migrant adolescents living in the camp by providing access to and/or facilitating their education, school readiness, psychosocial support and the development of resilience. Educators planned a series of lessons based on common themes, such as safety, goals and inspirations, self-care and hygiene measures, Olympic Games, and physical activity.

In total, 269 adolescents (50% girls) aged 12–17 years old participated, with an average weekly attendance of 125

students. Students originated from Syria (47%), Iraq (39%), Afghanistan (13%) and Iran (1%). The students' native languages included Kurdish (53%), Arabic (34%) and Dari/Farsi (13%). On average, the participants in the programme had missed 2.5 years of schooling, while some had never attended formal education at all.

PURPOSE OF THE PHYSICAL ACTIVITY PROGRAMME

The physical activity programme, which was part of the Skaramagas project, was developed to promote physical and mental health of adolescent refugees and migrants through structured sport, physical activity and play. The main aims were to offer suitable participation opportunities for adolescents, increase the physical activity level of the participants, as well as introduce them to unfamiliar sports, and the respective new sport skills. In addition, the programme intended to create a supportive and inclusive environment within a culturally sensitive approach. Further objectives were the promotion of mental health and psychosocial well-being through physical activity and sport participation, with minimum emphasis on

performance and competition. Prior to the programme's implementation, participants had limited or no opportunities to be physically active and had not participated in structured physical activity sessions for many years.

The programme consisted primarily of football, basketball, volleyball and a combination of endurance and weight training. Callisthenics, and weight training using sand-filled bottles, big water bottles, and body weight were key, especially for older students. The physical education teacher determined the session's activities with no specifications regarding the intensity of activities (figure 1). The programme was delivered three times per week with each exercise session lasting 50 min, and participants were free to choose the intensity they preferred.

CHALLENGES FACED AND LESSONS LEARNT

The initial plan was to implement the Sport Education model because it is a student-centred educational approach that contains cooperative learning, meaningful game experiences and various role tasks for students, and has a positive impact on adolescents' physical and psychological variables.⁵ However, this approach was abandoned early because the tension and emotional involvement attached to competitions obscured the attainment of social goals and values, and countered the psychosocial support and resilience development goals of the programme. Thus, the Sport Education model was



Figure 1 Participants in the physical activity programme supervised by the physical education teacher at Skaramagas refugee camp.

¹School of Education, University College Cork, Cork, Ireland

²Department of Education and Social Work, University of Luxembourg, Luxembourg

Correspondence to Dr Manolis Adamakis, University College Cork, Cork T12KX72, Ireland; manosadam@phed.uoa.gr

replaced by the Teaching Personal and Social Responsibility (TPSR) through Physical Activity model.⁶ The TPSR model promotes self-direction, empathy, respect for others' rights, cooperation and leadership skills by giving students increased amounts of responsibility and decision-making. A student-centred methodology through skill building and increased physical activity has fostered independence and improved decision-making skills for students.

Another challenge was developing mixed-cultural and mixed-gender groups. This was important to facilitate inclusion and prepare students for formal schooling. The ethnic and cultural tensions of the various communities' historical background were overcome by open-minded students who embraced multicultural/multigender small-group exercising experiences.

THE IMPACT OF THE PROGRAMME ON THE COMMUNITY

A climate of acceptance, diversity and gender equality was created through positive engagement in physical activity, and participants reported improvement of their mental health and psychosocial well-being. Older students exercised without direct supervision and took responsibility for their actions. The programme successfully fostered an active participatory role, promoting empowerment, self-confidence and eagerness to take an initiative in physical activities. It also developed team-building and intercultural understanding, breaking gender barriers and fostering tolerance and social cohesion. Most of the girls had never played sports before and were reluctant to participate in mixed-gender groups, so playing together was

emphasised to include girls safely and appropriately. Over time, students self-organised mixed-gender and nationality groups to play outdoor games and sports (eg, volleyball) during breaks and afternoon recess.

SUSTAINABILITY AND REPLICABILITY ELEMENTS OF THE PROGRAMME

This physical activity programme was based on the Sport for Protection Toolkit developed by United Nations High Commissioner for Refugees (UNHCR), the International Olympic Committee and Terre des Hommes.⁷ It was integrated in a holistic approach to facilitate refugee and migrant adolescent education, school readiness, psychosocial support, physical and mental health, and resilience. Delivered by a specialised physical educator with the assistance of a school psychologist, the programme established meaningful team sport participation opportunities for young women across nationalities.

CONCLUSION

The Skaramagas project showed that physical activity interventions appropriately implemented by adequately trained physical activity professionals can promote the physical and mental health of adolescent refugees and migrants. Sport and exercise professionals should bear in mind that refugees and migrants are not a homogeneous population, and, thus, physical activity programmes should be tailored to individual needs and constantly re-evaluated.

Contributors I am the only author of this paper.

Funding The author has not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not applicable.

Provenance and peer review Not commissioned; externally peer reviewed.

Data availability statement No data are available.

© Author(s) (or their employer(s)) 2022. No commercial re-use. See rights and permissions. Published by BMJ.



To cite Adamakis M. *Br J Sports Med* 2022;**56**:115–116.

Accepted 15 September 2021

Published Online First 22 September 2021

Br J Sports Med 2022;**56**:115–116.
doi:10.1136/bjsports-2021-104636

ORCID iD

Manolis Adamakis <http://orcid.org/0000-0003-3881-6892>

REFERENCES

- 1 Charlson F, van Ommeren M, Flaxman A, *et al*. New who prevalence estimates of mental disorders in conflict settings: a systematic review and meta-analysis. *Lancet* 2019;**394**:240–8.
- 2 Rosenbaum S, Danielson S, Baggenstos B. Promoting physical activity for mental health in contexts of displacement. *Br J Sport Med* 2021 <https://blogs.bmj.com/bjism/2021/05/31/promoting-physical-activity-for-mental-health-in-contexts-of-displacement/>
- 3 Ley C, Barrio MR. Promoting health of refugees in and through sport and physical activity: A psychosocial, trauma-sensitive approach. In: Wenzel T, Droždek B, eds. *An uncertain safety*. Springer, Cham, 2019: 301–43.
- 4 Rosenbaum S, Ager A, Snider L. Physical activity, mental health and psychosocial support. *Forced Migr Rev* 2021;**66**:34–7.
- 5 Siedentop D, Hastie P, van der Mars H. *Complete guide to sport education*. 2nd ed. Champaign, IL: Human Kinetics, 2011.
- 6 Hellison D. *Teaching personal and social responsibility through physical activity*. 3rd ed. Champaign, IL: Human Kinetics, 2011.
- 7 UNHCR, International Olympic Committee, Terre des Hommes. Sport for protection toolkit: programming with young people in forced displacement settings, 2021. Available: bit.ly/Sport-for-protection-toolkit-2018