Thrive LDN Mental Health and Wellbeing Support for Displaced and Crisis-Affected Communities: A Review

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Introduction and purpose

This report shares insights and recommendations from a review commissioned by Thrive LDN to better understand how existing mental health and wellbeing resources meet the needs of communities affected by displacement, conflict and crisis. Facilitated by Peace Collective, the review draws on conversations with community organisations, mental health practitioners, educators and individuals with lived experience.

This review set out to gather feedback and surface possibilities for better communication, deeper support, and more responsive pathways into care and connection. In doing so, it also highlighted the importance of informal spaces where mental health and wellbeing are experienced and supported, through everyday relationships, cultural practices, and acts of care. These spaces emerged as crucial to how support is accessed and understood.

Background and context

Many communities in London and beyond are navigating displacement, conflict, trauma, and social exclusion. Some have arrived as refugees or asylum seekers; others face generational impacts of war, conflict or persecution, not least ongoing international and domestic crises and conflict. Across all groups, there's a shared reality: mental health and wellbeing are shaped by context, they don't exist in a vacuum, and neither does support.

Thrive LDN has developed a substantial bank of trauma-informed, wellbeing and community resilience resources. This project set out to explore:

- How existing offers can be refreshed, reframed or redistributed
- Where gaps still exist
- What new tools or strategies are needed to better meet community needs

Through our engagement, participants shared that while academic and clinical frameworks offer valuable insights, these often feel distant from lived experience. Many expressed a desire not only for simplified or translated concepts, but for greater access to the source materials themselves, including research papers and studies that could inform and empower their own work. Bridging this gap through accessible language, practical tools, and transparent knowledge sharing was seen as central to building more inclusive and community-led support.

Approach

Between March and May 2025, Peace Collective conducted:

- **11 semi-structured interviews** with organisations working in mental health, education, and community resilience
- 4 small focus groups with community members and frontline practitioners
- A **resource review**, including Thrive LDN's current offers and related materials from peer agencies, exploring accessibility, cultural relevance and digital inclusion

Who we heard from

We engaged with a range of community organisations, mental health practitioners, educators, local activists and interested peoples.

Many of the organisations had previously worked with Thrive LDN to co-develop resources and training offers. This engagement was therefore framed as a chance to explore what had worked well, what could be strengthened, and what new needs may have emerged since the initial period of development.

We also connected with newer organisations who, while not directly involved in the creation of Thrive LDN resources, had supported displaced or crisis-affected communities and offered valuable insight into the changing landscape of community wellbeing.

As anticipated in our original delivery plan, engagement was shaped around relationships with groups already known to Thrive LDN, while also seeking to include additional voices and frontline experience. However, a recurring theme across the process was the pressure many voluntary and community sector organisations are under. Some were unable to engage fully due to capacity constraints, such as competing project or funding deadlines, and existing team capacity. These are not minor issues: they speak to a deeper systemic fragility within the structures that communities rely on for support.

Any approach to improving mental health and wellbeing provision must therefore hold both realities at once, the need to resource individual wellbeing, and the need to sustain the organisations and informal networks that provide care, connection, and consistency.

We also heard clearly that not all mental health and wellbeing support happens through formal services. For many communities, the first and most trusted engagement points are every day, relational, and informal, shared meals, a conversation after prayer, a parent group at the school gates, a community walk, a WhatsApp message in a group chat. These moments aren't always labelled as 'support', but they are where connection happens and where people begin to open up. If our goal is to improve access, we need to meet people where they already are, not expect them to necessarily enter unfamiliar systems first.

Current offer and building on existing strengths

Thrive LDN has developed and curates a strong and thoughtful collection of resources to support mental health and wellbeing for people affected by displacement, conflict and crisis. The "Resources for Displaced People and Crisis Situations" webpage includes translated guides on managing stress and uncertainty, information on navigating services, and tools to support emotional wellbeing. Alongside this, Thrive LDN's broader offer, supports professionals and community groups working in trauma-informed and resilience-based practice.

Throughout this process, many partners spoke positively about their experience of engagement with Thrive LDN, particularly those involved in co-developing resources and training materials. The current offer was widely recognised as helpful in content, particularly where they had been co-developed or tailored to community needs. Feedback also pointed to opportunities to enhance accessibility, framing and reach, ensuring these tools can be more easily found, understood and applied by those who need them most.

A core reflection was not what exists, but how it is framed, shared and accessed. This distinction emerged consistently across conversations and speaks to a wider opportunity for enhancing the visibility and usability of Thrive LDN's existing resources. Within the 'Resources for Displaced People and Crisis Situations' section, there is an opportunity to more clearly differentiate between materials intended for different audiences, such as:

- Frontline staff and support workers, including teachers, youth workers, facilitators and others delivering direct support in schools, health, or community settings
- Community organisations and faith groups, such as voluntary sector services, local charities, and places of worship that provide ongoing support, outreach and advocacy
- Individual users or community members navigating mental health challenges

Clarifying these pathways, and matching resources to the realities of both informal and formal support systems, could make the existing offer more intuitive and usable.

Further insights from engagement

Clarifying these pathways, and better aligning resources with the realities of both informal and formal support systems, presents a clear opportunity. Doing so could make the current offer more intuitive, usable, and impactful, especially for those navigating displacement or crisis.

The following section builds on this insight, drawing together the recurring themes and lived experiences shared with us through community engagement.

1. Access is shaped by framing, format, and familiarity

In our discussions, participants emphasised that access is not only about availability. Resources were sometimes difficult to locate, understand, or apply, not because they didn't exist, but because the format or language felt inaccessible. PDF-heavy documents, unfamiliar or clinical terms, and web-only formats were described as barriers.

As one participant shared:

"Translated materials help, but it's the way you use them that builds trust. The content has to feel relevant, not just available."

This points to more than just a communication matter. It's about intentional formatting and delivery. Many contributors suggested that small changes in how resources are designed and shared could significantly improve their accessibility and impact. This includes using mobile-friendly formats (such as WhatsApp-shareable infographics or short videos), visual and multilingual communication tools, and offering printable, low-tech options that work in settings with limited digital access.

Participants consistently stressed that practical, user-friendly formats, particularly those that feel easy to pass on, display, or discuss, would better support informal wellbeing conversations and extend the reach of Thrive LDN's resources across diverse community contexts.

2. The arts and shared spaces are powerful gateways

Participants highlighted that direct conversations about "mental health" can feel uncomfortable, stigmatised or unfamiliar in some communities. However, when wellbeing is approached through shared meals, cultural rituals, creative workshops or storytelling, it feels more natural, safe, and engaging.

These activities were described as "proxy entry points", ways to build trust, connection and reflection without relying on formal or clinical framing. Many contributors felt that more support for these approaches, through tools, funding or recognition, help normalise emotional wellbeing conversations in more inclusive ways.

3. Practitioners and peer leaders value support in contextualising tools

Participants consistently praised the depth and relevance of Thrive LDN's resources. However, it was also shared that applying these tools in their specific settings, particularly those without formal mental health infrastructure, could be challenging without clearer guidance.

"We don't always know how this applies to our setting."

Contributors identified three key areas of support that would help them use resources more confidently and meaningfully:

- Context-specific framing guidance (e.g. "How might this look in a school without a counsellor?")
- Opportunities for peer learning and reflection

• Real-world examples of how others have adapted Thrive resources

They also emphasised the value of simple, accessible tools, including non-clinical prompts and active listening guides, to support informal conversations about wellbeing, particularly for those in peer, volunteer or community leadership roles.

This feedback also underscored the need for culturally responsive framing. In many settings, Western mental health terminology doesn't resonate, and in some cases, it can feel stigmatising or unsafe. Contributors highlighted the importance of meeting people in their own language and worldview, using familiar metaphors, visual prompts or shared cultural references.

A common suggestion was to develop a stigma-aware conversation guide, built from lived experience, to support gentle, culturally sensitive dialogue, particularly in communities where the term "mental health" itself can create barriers.

4. Counteracting complexity and systemic distress

In several of our conversations, contributors reflected that trauma is not simply historic or personal, it is often (re-)triggered by the systems people must navigate, from asylum and benefits processes to housing bureaucracy. These systems disempower and confuse, compounding distress.

Others shared how public pressure to express a view on global events, particularly in the context of international conflict, has created additional emotional strain. It leads people feeling isolated and under scrutiny, compounding trauma and affecting collective wellbeing. This mirrors wider themes of identity-based stress, stigma and fear across different groups.

There is clear value in resources that offer practical clarity: helping people understand their rights, what to expect, and where to turn. When individuals feel more informed and prepared, they are better able to maintain a sense of agency; itself a key protective factor for mental health.

This is not just about providing information, but about recognising that emotional and cognitive overload is a barrier to wellbeing. Resources that reduce confusion and offer clear, calm guidance were described as especially helpful.

Opportunities for development

1. Diversify formats for wider accessibility

Existing resources are often delivered as PDFs or long-form documents hosted online. These formats aren't always practical for people with limited digital access, lower literacy levels, or those relying on mobile phones. More modular, visual, audio or WhatsApp-shareable formats could support broader engagement.

2. Clarify audience and use case

Thrive LDN's "Resources for Displaced People and Crisis Situations" page offers a valuable collection of thoughtfully translated materials designed to support people facing complex and often destabilising circumstances. However, even high-quality resources can be hard to navigate without clearer framing.

Structuring this section around common user identities or scenarios, such as:

- "I've just arrived and don't know where to start"
- "I need help managing stress or uncertainty"

- "I'm supporting someone who's just arrived"
- "I'm a teacher and need tools for my students' wellbeing"

could make it easier for both individuals and professionals to locate what's most relevant. This does not require new content, but a more intuitive, scenariobased signposting approach.

In particular, clearly distinguishing between:

- Resources for individuals and families (e.g. emotional support, stress guides, translated tools)
- Resources for supporters and professionals (e.g. trauma-informed practice guides, educator tools)

would perhaps better reflect the dual audience Thrive LDN's resources already serve and enhance the user experience for those navigating displacement or crisis.

3. Provide support for those holding space

Teachers, youth workers, facilitators and volunteers regularly act as emotional first responders, yet few resources speak directly to their needs. There is an opportunity to develop light-touch tools focused on reflective practice, and emotional resilience for those supporting others.

4. Integrate cultural, creative and faith-based access points

Arts, food, music and faith were consistently identified by partners as effective gateways into wellbeing conversations. These every day, culturally grounded practices are underrepresented in the current offer, yet they hold great potential for stigma-free engagement.

5. Refresh and adapt resources for evolving needs

Some existing tools still understandably carry COVID-specific framing or crisis language that no longer aligns with current situations. There is value in refreshing key resources to reflect newer challenges, population shifts, and emotional needs, including long-term displacement, mediarelated stress, and high-risk safeguarding concerns such as suicide prevention for displaced individuals.

6. Develop tools for stigma-aware conversation

One of the most repeated requests was for a resource that supports professionals and peers to have meaningful conversations about wellbeing with communities where "mental health" language is stigmatised or inaccessible.

Participants also suggested further using visuals, metaphors or stories rather than medical language to open up these conversations, especially in communities where trauma is an unfamiliar or foreign term.

For some groups, labels like "refugee" also felt alienating or misaligned with identity. Resources labelled this way may go unused even when their content is relevant.

Recommendations

The following recommendations are drawn from the development opportunities outlined above, shaped by participant insights and a review of existing resources. They are grouped into three overarching areas, with a mix of immediate and longer-term opportunities.

1. Improve communication and dissemination

• Introduce user-centred navigation within the "Resources for Displaced People and Crisis Situations" section of the Thrive LDN website, allowing visitors to self-identify by role or need (e.g. "I'm new to the UK", "I'm a teacher", "I support displaced people"). This would help match tools more intuitively to users' contexts, without requiring new content.

Immediate

•	In parallel, develop a short framing guide for practitioners to support professionals in interpreting and applying Thrive LDN resources across different settings (e.g. schools, youth groups, faith organisations). While some implementation and contextual framing already exists in areas such as trauma-informed training, feedback indicated a need for a general, cross- cutting overview to help practitioners navigate and adapt the full offer more easily.	Immediate
•	Re-format existing resources into mobile-first formats (e.g. WhatsApp infographics, short videos, printable flyers) to better reach individuals with limited time, digital access, or literacy.	Medium
•	Use existing outreach infrastructure (e.g. Thrive LDN's trauma-informed training email series) to proactively share tools with individuals and community members, particularly those navigating displacement or unfamiliar systems, via direct, accessible inbox updates.	Immediate
•	 Develop two targeted resources: Active listening guide: practical tips and tools to support peer supporters, volunteers and educators in holding everyday wellbeing conversations. Stigma-aware conversation guide: culturally sensitive language and real-life framings to support non-clinical mental health dialogue. 	Immediate
•	Consider safeguarding and suicide prevention needs specific to displacement. Adapting existing safeguarding materials and suicide prevention tools to reflect these unique challenges would increase access to support.	Immediate
•	 Expand offline and community-based dissemination by: Continuing partnerships with trusted organisations and informal actors who can embed resources in everyday relational settings Promoting resources in familiar spaces, e.g. GPs, schools, mosques, food banks, community kitchens Reviewing category labels (e.g. "refugee" "displaced") to ensure alignment with how people self-identify and engage 	Immediate to medium
•	Create a shared learning loop to showcase how organisations use digital tools (e.g. WhatsApp groups, email outreach) to engage displaced communities. Consider a digital practice hub or peer-led learning series.	Medium to long
•	 Create a user-centred resource and support directory A commonly shared idea was the creation of a centralised directory of mental health and wellbeing support. 	Long
2.	Equip educators and frontline workers	
•	Design a light-touch <i>educator wellbeing</i> toolkit, focusing on vicarious trauma, reflective practice, and emotional resilience. This work would be best advanced through partnerships with organisations experienced in trauma-informed delivery and education sector engagement.	Immediate
•	Pilot a short training series for schools on trauma-informed care	Immediate to medium
•	Develop resources that reflect the everyday realities of frontline practitioners (e.g. workload, safeguarding tensions, burnout), rather than relying solely on clinical frameworks	Medium

•	 Enhance and promote culturally responsive content by: Refreshing materials on intersectionality and cultural competency Including reflective prompts to support inclusive, trauma-aware facilitation Providing case studies and example risk assessments to guide safe practice in diverse settings 	Immediate to medium
3. •	 Fund community-led approaches through small grants Launch an open call for ideas from under-represented groups to host activities that foster belonging and wellbeing (e.g. food gatherings, creative workshops, community storytelling) This would require limited monitoring; instead, invite groups to submit a short reflection or case study at the end to help build portfolio of case studies of effective examples of mental health and wellbeing support. This aims to support informal mental health actors (e.g. community volunteers, faith leaders, youth organisers) through dedicated microfunding 	Immediate to medium

Conclusion and next steps

This review reinforced what many already recognise: that meaningful support for mental health and wellbeing is happening every day, often quietly, within communities, particularly those navigating displacement, conflict or crisis.

Thrive LDN's current offer was consistently described as thoughtful, relevant, and well designed. Many of the tools and resources already in place are valued by those who know and use them. At the same time, the feedback surfaced clear opportunities for tuning and extending this offer, not by starting from scratch, but by strengthening communication, broadening accessibility, and improving visibility. Participants also highlighted the need to support the informal actors and everyday spaces where wellbeing support naturally takes place.

One long-term opportunity raised in our conversations was the idea of a resource/service directory. While valuable in principle, such directories were discussed as difficult to maintain and are only as useful as they are current. In the meantime, enhancing user-centred navigation and continuing to gather and signpost known, high-quality resources, could serve as a practical and responsive step, laying the groundwork for a more flexible and collaborative resource directory in the future.

By deepening coordination, sharpening framing, and investing in the trusted networks that connect people to care, Thrive LDN can build on what is already working, ensuring the right tools reach the right people, in the right way, and at the right time.

Appendix A: Summary of Proposed Resource Development Opportunities

To support implementation, the table below summarises key resource development opportunities identified through this review, their intended audiences, and core purposes.

Resource/Tool	Primary Audience	Purpose
Framing guide for practitioners	Educators, youth workers, community facilitators, health and social care practitioners	To support adaptation of Thrive LDN resources for different contexts and settings
Active listening guide	Educators, peer supporters, community volunteers	To build confidence in holding supportive, non-clinical conversations
Stigma-aware conversation guide	Community organisations, informal leaders, peer facilitators	To support culturally sensitive conversations without reliance on clinical language
Refreshed dissemination formats	Individual users, small community groups	To improve access via mobile- friendly, visual and printable formats
Email outreach series	Community members, especially those navigating asylum/displacement	To deliver resources directly into inboxes and bypass digital access barriers

Appendix B: Focus Group Participant Demographics

Demographic data was collected from individuals who signed up to participate in focus groups for this review. Responding to these questions was optional, and as such, not all participants provided full information. The figures below reflect only those who chose to share demographic details.

This data helps illustrate the diversity of those who engaged with the opportunity to contribute.

Full sign-up data

Ethnic group (self-identified):

- Black/African/Caribbean/Black British – African: 7
- Black/African/Caribbean/Black British – Caribbean: 1
- White English/Welsh/Scottish/Northern Irish/British: 5
- White Irish: 1
- White Other white background: 2
- Mixed/Multiple ethnic groups: 2
 Asian/Asian British Other background: 1
- Other ethnic group Arab: 1
- Other ethnic group not specified: 1

• Unspecified: 2

Gender (self-described):

- Woman/girl: 10
- Man/boy: 7
- Unspecified: 4

London borough(s) lived or worked in:

- Pan-London: 5
- Lambeth: 3
- Hounslow: 2
- Lewisham, Newham, Camden, Brent, Harrow, Hillingdon, Southwark, Tower Hamlets, Kingston, Bromley, Waltham Forest, Barnet: 1 each

Sector (if applicable):

- Community, voluntary, charitable, social enterprise, faith: 15
- Education: 1

- Private sector: 2
- Primary care: 1
- Local authority: 3
- Unspecified: 2

Of these, the following participants attended the focus groups:

Ethnic group (self-identified):

- Black/African/Caribbean/Black British – African: 5
- Black/African/Caribbean/Black British – Caribbean: 1
- White English/Welsh/Scottish/Northern Irish/British: 1
- White Other white background: 2
- Mixed/Multiple ethnic groups Other mixed background: 1

Gender (self-described):

- Woman/girl: 6
- Man/boy: 3
- Unspecified: 1

London borough(s) lived or worked in:

- Pan-London: 3
- Lambeth: 2
- Lewisham: 1
- Kingston upon Thames: 1
- Hounslow: 1
- Waltham Forest: 1
- Newham: 1

Sector (if applicable):

- Community, voluntary, charitable, social enterprise, faith: 6
- Education: 1
- Private sector: 2
- Primary care: 1
- Local authority: 1

Appendix C: Note on stakeholder engagement and reporting

The organisations engaged through this review were largely those who had previously collaborated with Thrive LDN, particularly in the co-development or delivery of relevant resources. The purpose of these conversations was to reflect on how those resources are currently being used, explore what has worked well, and identify any emerging needs or learning since their initial creation.

Given the informal nature of these conversations and the varying levels of participation, we have not included a list of organisations here. While many were able to contribute insightfully, others shared that they did not have capacity to engage within the timeframe, in some cases due to pressing funding pressures or delivery commitments. One community organisation, for example, responded: *"Apologies, I have zero capacity right now – we are in a bit of an existential funding crisis, so I am spending every minute I have on fundraising at the moment."*