Mental health and psychosocial support (MHPSS) in the regional response for Ukrainian refugees

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Presentation for
Webinar ‘Opportunities and Challenges for the Traumatic Stress Community to Assist those Affected by the War in Ukraine’

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Almost 4 million Ukrainian refugees

<table>
<thead>
<tr>
<th>Country</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poland</td>
<td>2,314,623</td>
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<tr>
<td>Romania</td>
<td>602,461</td>
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<tr>
<td>Moldova</td>
<td>385,222</td>
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<tr>
<td>Hungary</td>
<td>359,197</td>
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<tr>
<td>Slovakia</td>
<td>278,238</td>
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<tr>
<td>Russia</td>
<td>271,254</td>
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<tr>
<td>Belarus</td>
<td>9,875</td>
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<tr>
<td>TOTAL</td>
<td>3,901,713</td>
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Regional Refugee Response Plan

Inter-agency partners are responding to the refugee emergency.
UNHCR and partners have emergency teams on the ground and are assisting the authorities by providing technical support, carrying out and expanding regular protection monitoring and strengthening reception capacity, as well as ensuring that basic and urgent needs are met. Across the region, reception centres are open and hotlines and webpages are available to orient new arrivals.
The RRP will strengthen the resilience of host communities and build social cohesion with the refugees. RRPs will cooperate with relevant authorities to support third-country nationals fleeing Ukraine, providing them with vital services and medical help, and assisting vulnerable individuals with humanitarian returns if required.
In line with the Global Compact on Refugees, the plan foresees a multi-partner response in support of the hosting governments and builds on the capacities and expertise of the refugees themselves and the communities acting as first responders.

The urgent needs identified to date include: strengthening and supporting access to mental health and psycho-social support, provision of basic and essential items including food, unrestricted cash assistance, and core relief items, and WASH, education and health services, including sexual and reproductive health services. The freezing winter temperatures mean emergency shelter assistance and items such as heaters, warm clothes and shoes are a priority.

Women and girls

- Many persons arriving in neighbouring countries are women-headed households, single women, adolescent girls, older women → heightened risk of GBV
- Government of Ukraine has issued a ban for men of conscription age (18-60 years) to leave the country.
- GBV experiences
  - Before displacement
  - During the displacement: sexual violence, trafficking for the purposes of sexual exploitation, SEA
- Risks increased in the context of informal shelter, reception and transit facilities, accommodation centres, private arrangements for transportation from the border.
- Many volunteers seeking to help new arrivals, but often not vetted and with limited experiences in humanitarian assistance and limited protection capacity
Children

- Lack of comprehensive registration systems / dedicated procedures for identifying children with specific needs creates significant protection risks, particularly for Unaccompanied and Separated Children (UASC).
- Children without parental care are at a heightened risk of violence, GBV, abuse, exploitation and neglect.
- Risk for trafficking
- Particular vulnerabilities of children who went through traumatic experiences, or who have pre-existing psychosocial/ intellectual disabilities
- Evacuation of childcare institutions from Ukraine to Poland.

Mental Health and Psychosocial Support
Mental health & psychosocial support

• protecting or promoting psychosocial well-being

and/or

• preventing or treating mental health conditions

Mental Health Psychosocial Support

Issues in humanitarian emergencies

• High levels of distress: anxiety, worry, grief
• Increased prevalence of common mental disorders: depression, PTSD, anxiety disorder
• Increased prevalence + increased vulnerability of people with severe mental disorders
• Substance use issues
### Prevalence of mental health conditions in populations living in conflict affected areas

| Severe disorders (schizophrenia, bipolar, severe depression, severe anxiety (including severe PTSD)) | 5.1% |
| Moderate mental disorder (moderate forms of depression and anxiety, including moderate PTSD) | 4.0% |
| Mild mental disorder (mild forms of depression and anxiety, including mild PTSD) | 13.0% |
| **TOTAL** | **22.1%** |

Lancet [http://dx.doi.org/10.1016/S0140-6736(19)30544-1](http://dx.doi.org/10.1016/S0140-6736(19)30544-1).

### Role of daily stressors

*(Miller & Rasmussen, 2016)*

- Armed Conflict
- Displacement-related stressors
  - Poverty
  - Unemployment/Dependency on Aid
  - Family Conflict and Violence
  - Loss of Property
  - Discrimination
  - Separation from Family Members
  - Uncertainty Regarding Asylum Status
  - Detention in Asylum Seekers Center
  - Loss of Social Support Networks

- Individual Mental Health
- Family Functioning & Parental Wellbeing
Response

Problems often seen in MHPSS programmes for refugees (in the past?)

- Assumption that majority are ‘traumatised’ and require psychological therapy or counselling
- Focus on ‘traumatic events’ instead of current social stressors.
- Resources went to:
  - Screening and identification of symptoms
  - Provision of ‘trauma counselling’ during emergencies or in unstable situations
- ‘Service’ model with emphasis on pathology and victimhood, not resilience and community mobilization.
SPHERE HANDBOOK (2018 version)
Mental Health Standard: 9 key actions

1. Coordinate MHPSS across sectors.
2. Develop programmes based on identified needs and resources.
3. Work with community members, including marginalised people, to strengthen community self-help and social support.
4. Orient staff and volunteers on how to offer PFA.
5. Make basic clinical mental healthcare available at every healthcare facility.
6. Make psychological interventions available where possible for people impaired by prolonged distress.
7. Protect the rights of people with severe mental health conditions in the community, hospitals and institutions.
8. Minimise harm related to alcohol and drugs.
9. Take steps to develop a sustainable mental health system during early recovery planning and protracted crises.
1. Using an MHPSS approach

- **MHPSS approach**
  - providing a humanitarian response in ways that are beneficial to mental health and psychosocial wellbeing. Using an MHPSS approach does not necessarily mean that humanitarian actors should do different things; rather that they do things differently.

- **MHPSS interventions**
  - activities with the explicit goal to improve the mental health and psychosocial wellbeing of refugees. MHPSS interventions are usually implemented by health, protection and education actors.

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**Information**

- Leaflets
- Posters
- Websites
- Apps

Where to find support?

What are rights?
Psychological First Aid: a skill for all first responders

2. Strengthening community and family support

• Trainings in parenting skills
• Providing safe spaces for women and children in need
• Community-based psychosocial volunteers who can help other people in their community through basic psychosocial support and identify and refer people who need more support
Blue Dots

- One-stop-shop and safe space with a minimum and standardized set of protection services for children, families and others with specific needs, in support of existing services and government efforts
- Aim:
  - Improve accessibility and
  - Promote standardization of services provided by different partners
  - Promote predictability
- Includes MHPSS
- UNHCR and UNICEF have agreed to jointly roll out 25 Blue Dots in 6 countries (Czech Republic, Hungary, the Republic of Moldova, Poland, Romania and Slovakia).
- Several hubs are already operational eg
  - Romania (Sighet and Siret at border Ukraine)
  - Moldova (Otaci border crossing, Palanca border crossing, Moldexpo reception centre Chisinau).

3. Introduce ‘scalable psychological interventions’
4. Clinical mental health care

- Ensuring access
  - Language
  - Practical issues
  - Prescriptions
  - Insurance

Coordination

- Regional Refugee Response Plan with 100 organizations for an initial period of 6 months
- UNHCR facilitates coordination in line with the Refugee Coordination Model
- Inter-agency Refugee Coordination Forums (RCF), led by UNHCR at country level to support the efforts of the national governments.
- Structures are meant to be agile and to be adjusted as the situation evolves.
Coordination – an example

Refugee Coordination Structure in Poland INTERIM/DRAFT

Government of Poland / UNHCR

- National NGO Forum
- Cash Technical Working Group
- Refugee Coordination Forum / Inter-Sector Coordination Group
- Information Management WG
- FOCAL M&E
- AAP Working Group

Education Sector

Basic Needs Sector

Health Sector

Protection Sector

Logistics

GBV Sub-Sector

Child Protection Sub-sector

Guidance and tools
International consensus guidelines

IASC: Guidelines on Mental Health and Psychosocial Support in Emergency Settings
MHPSS in Emergencies
free course WHO

- Online orientation course to strengthen the competencies to establish, support and scale-up Mental Health and Psychosocial Support (MHPSS) in countries.

- For health staff in humanitarian settings / Ministries of Health

https://openwho.org

Introducing MHPSS in emergencies

- Overview on Mental Health and Psychosocial Support (MHPSS) definitions, guidelines and principles
- Coordinating a team with other sectors / clusters providing Mental Health and Psychosocial Support (MHPSS)
- Assessing Mental Health and Psychosocial Support (MHPSS) needs and resources to guide programming
- Working with community members, including marginalised people, to strengthen community well-being and social support
- Including basic psychosocial self-care in an emergency response or programme
- Developing and implementing a plan for mental health integration into general health care in humanitarian settings
- Identifying suitable tools and integrating psychological interventions into health and social sector implementation plans in emergencies
- Assessing psychiatric hospitals and supporting people with severe mental health conditions
- Assessment of needs and integrating interventions for the management of conditions related to violence
- Engaging multiple stakeholders to build back better sustainable mental health care following emergencies
- Mental Health and Psychosocial Support (MHPSS) during COVID-19
Support NGO working in Ukraine. Global Initiative for Psychiatry Ukraine

- NGO with 30+ years of experience in Ukraine
- Strong local network with national trainers
- https://www.gip-global.org

Remember 2015...

1. Treat all people with dignity and respect and support self-reliance
2. Respond to people in distress in a humane and supportive way
3. Provide information about services, supports and legal rights and obligations
4. Provide relevant psycho-education and use appropriate language
5. Prioritize protection and psychosocial support for children, in particular children who are separated, unaccompanied and with special needs
6. Strengthen family support
7. Identify and protect persons with specific needs
8. Make interventions culturally relevant and ensure adequate interpretation
9. Provide treatment for people with severe mental disorders
10. Do not start psychotherapeutic treatments that need follow up when follow up is unlikely to be possible
11. Monitoring and managing wellbeing of staff and volunteers
12. Do not work in isolation: coordinate and cooperate with others
More information

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• mhpss.refgroup@gmail.com
  – Weekly calls
  – Daily updates for mhpss mapping