

War in Ukraine: One year on

Supporting neighbouring countries to address mental health challenges



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Meeting Report

Friday, 31 March 2023 | 12:30 – 13:30 CET

Hosted by EuroHealthNet and the South-Eastern Europe Health Network (SEEHN).

Introduction

This report provides a summary of a virtual meeting that took place on Friday, 31 March 2023, from 12:30 – 13:30 CET hosted by EuroHealthNet and the South-Eastern Europe Health Network (SEEHN). This meeting gathered national health institutes and authorities in the countries neighbouring Ukraine and those hosting Ukrainian refugees: Bosnia and Herzegovina, Bulgaria, Hungary, North Macedonia, Moldova, Slovakia and Slovenia.

Objectives

The purpose of this meeting was two-fold:

1. To discuss common and specific challenges related to mental health and psychosocial support mechanisms for Ukrainian refugees faced by members from EuroHealthNet's and SEEHN's networks.
2. To discuss what additional support is needed and how this support can be given, in terms of connections, information, joint advocacy and/or proposals for joint implementation measures of the public health institutes (such as in the area of mental health, etc).

Participant representatives:

- **Bosnia and Herzegovina**, Dr Biljana Lakic, psychiatrist, psychotherapist, SEEHN nominated Focal Point on behalf of the Ministry of Health and Civil Affairs, Republic of Srpska
- **Bulgaria**, Romyana Dinolova, Mental Health and Prevention of Addiction Directorate, National Center of Public Health and Analyses
- **North Macedonia**, Assoc. Prof. Dr Stojan Bajraktarov, Medical Director at Psychiatry Clinic, Medical Faculty, University St. Cyril and Methodius
- **Moldova**, Dr Svetlana Nicolaescu, Secretary of State, Ministry of Health
- **Slovenia**, Evita Leskovsek, National Public Health Institute, Mental Health Center
- **Hungary**, Zsofia Kimmel, Health Promotion Specialist, National Public Health Center, Department of Public Health Strategy, Health Promotion and Monitoring (observer)

Apologies:

- **Bosnia and Herzegovina**, Dr Goran Cerkez, Assistant Minister, Ministry of Health
- **Slovakia**, Prof. Jozef Suvada, Prime Minister's Advisor for Health Policy, Advocacy and Science, Member of WHO Executive Board

Organisation representatives:

- Caroline Costongs (chair), Dorota Sienkiewicz and Lina Papartyte, EuroHealthNet.
- Mira Dasic (chair), Vesna Arsova and Tatiana Paduraru, SEEHN Secretariat.

1. Opening

Mira Dasic, Director SEEHN Secretariat.

- SEEHN and EuroHealthNet organise this meeting to help members exchange and brainstorm together freely on further ideas and initiatives that could minimise the impact of the armed conflict on people fleeing Ukraine.
- At the beginning of the war, countries focused on the emergency support to the refugees, but now we are here to see how EuroHealthNet and SEEHN can support Building bridges across Balkans.

Caroline Costongs, Director EuroHealthNet.

- A year ago, the first EuroHealthNet and SEEHN roundtable addressed issues such as the more acute medical care needs and vaccination, but now challenges shift to addressing long-term needs, including mental health, of the now more than 8 million displaced Ukrainian people.
- Mental health of Ukrainian refugees can be improved by giving them access to services such as education and employment. This gives a sense of stability and purpose, alleviates financial stress and connects them with their new community locally.
- Exchanging good practices is important. Caroline opened the floor for exchange inviting representatives to share their efforts to address mental health of Ukrainian refugees in their respective countries.



Picture 1. Screenshot of the kick-off of the roundtable discussion. Caroline Costongs (top left), Evita Leskovsek (lower left), Svetlana Nicolaescu (lower middle), Dorota Sienkiewicz (top middle), Mira Dasic (top right), Biljana Lakic (middle on the right), Stojan Bajraktarov (lower right)

2. Roundtable

Bosnia and Herzegovina

Dr Biljana Lakic, psychiatrist, psychotherapist, SEEHN nominated Focal Point on behalf of the Ministry of Health and Civil Affairs, Republic of Srpska

- In Bosnia, support from the international community was important after the war, also in relation to mental health and psychosocial issues. During the period of reconstruction, they reformed mental health support system, moving from hospital care to community mental health services.
- Consequences of war will be huge on many levels but especially on mental health. Many veterans in BiH still have post-war traumas, even 20 years after the war ended. War veterans need support as soon as possible. They need opportunities to find jobs and work after the war. Research with refugees has shown that material insecurity was a huge risk factor for the continuation of trauma.
- In her psychotherapy practice she sees that many people who are now in their forties, have reactivated war trauma that they experienced when they were 6 year old. For example, queuing with the car at the border when coming back after holiday can evoke a panic attack, because they remember how they were waiting in the convoy to cross the border with their parents. Children from veteran families, they carry transgenerational war trauma.
- Thinking forward we need to support people that are living in the institutions, caregivers, vulnerable groups, address gender based violence, alcohol abuse and psychoactive substances, many problems that will arise.

BULGARIA

Rumyana Dinolova, Mental Health and Prevention of Addiction Directorate, National Center of Public Health and Analyses

- National Center of Public Health and Analyses working together with the WHO, prepared an education workbook for the frontline volunteers working with the Ukrainian refugees. It was designed to support volunteers to recognise mental health problem, including PTSD and guide those individuals needing help further. The support services mentioned in the workbook were mental health services and outpatient services.
- In collaboration with the WHO, they organised an event on prevention of burnout for persons who work with the refugees on the frontline.

NORTH MACEDONIA

Assoc. Prof. Dr. Stojan Bajraktarov, Medical Director at Psychiatry Clinic, Medical Faculty, University St. Cyril and Methodius

- Echoing Dr. Lakic, Prof. Bajraktarov said that being part of the former Yugoslavia, North Macedonia has a lot of experience in addressing war-related mental health problems. During the reconstruction period, there were many programmes ran by different

international organisations that helped developing community mental health services, conducted capacity building, etc.

- It is impossible to address mental health needs quickly; stress can be experienced even much later in life. They are still building their capacity to combat trauma, SEEHN network is very important in this respect.
- In the situation like this (post-COVID and war in the European region) with mass stress, when there are not enough professionals, we could involve other type of people and develop their capacity to support the population in need. It is important to focus on children and adolescents as the biggest consequences are on them. Programmes from the EU could be used now

MOLDOVA

Svetlana Nicolaescu, Secretary of State of the Ministry of Health

- March 2023, 800 000 Ukrainian refugees crossed to Republic of Moldova; currently the country is hosting 90 000 Ukrainian refugees. It is a significant challenge for Moldova, that has a population of 2,6 mln. At the beginning, Moldova had a lot of needs to be able to respond to the needs of the refugees. Needs and response differ in different stages. Initial focus was on fast response at the points of entry.
- Country level assessment was conducted in September-October 2022 in partnership with UNICEF, UNHCR and other international partners to guide the response. Some of the findings include:
 - 70% of people who participated in the study reported that primary needs were cash assistance and food, irrespective of type of accommodation that person had.
 - More than 43% responded that health was one of the primary needs, irrespective of type of accommodation.
 - 3% of respondents said that psychosocial support was their primary need. Disaggregated numbers shows that refugees hosted by Moldovan families reported 0 percent of mental health needs, but 4-5% of those living in private or refugee accommodation centres.
 - More than 20% needed to access health services. From those who reported this need, 65% accessed health services. The reasons for not accessing: 20% of those living in private settings and 9% of those living in refugee centres reported lack of information about the health care providers.
- The assessment included the component on the psychosocial support. The awareness about the availability of psychosocial support appears to be an issue since only 40% of respondents could say that such services existed in their community. It could also be the case that people focus on other more pressing primary needs rather than taking care of psychosocial wellbeing.
- Nonetheless, such support was available starting with special medical teams. For example, there were 14 international organisations that deployed their medical support teams in different periods of times in addition to Moldovan teams that were always present. 70% of the teams were providing psychosocial support as part of the services package. They range from group counselling to other types of services. They strengthened national health system to be able to provide psychosocial services.

- Government of Moldova took a decision to grant a temporary protection to people displaced from Ukraine as of March 2023, which allows people to work, access primary and emergency care including psychosocial support, right to accommodation.
- 50% of refugees are children and adolescents, as a result, they look at the prevention side too, and work is done together with the education services. The psychosocial aspect is considered when organising child friendly zones, summer camps, and in school, etc. In addition, they have hotlines for youth. Overall, professionals were trained to identify and respond to their needs.

SLOVENIA

Dr. Evita Leskovsek, National Public Health Institute (NIJZ), Mental Health Center

- The NIPH PR-department has developed a website with content on medical care for Ukrainian refugees. The information is also translated into Ukrainian.
- At the NIJZ, they established a Task Force on Migrants that included all units of the Public Health Institute. Activities of the Task Force include:
 - starting a new cooperation with IOM, high commissioner for refugees.
 - establishing a closer cooperation with local communities.
 - conducting the focus groups of the refugees both from arrival centers and refugees living in private accommodation in spring 2022
 - conducting a survey on Assessment of the needs and access to health services of Ukrainian refugees in Slovenia under the auspices of the World Health Organization.
- Among other findings, focus group results showed increased demand for help in the field of chronic non-communicable diseases, dentistry, women's sexual and reproductive health, pediatrics and provision of help in the field of mental health, especially for children and adolescents.
- The WHO study on perceived health service needs and barriers among Ukrainian refugees in Slovenia found that:
 - while emergency services were commonly used, they often failed to connect people with routine care.
 - Language barriers also made it difficult for those over 50 who don't speak English or Slovenian to schedule appointments or see doctors. They promote Slovenian language courses but communication needs to be improved.
 - In Slovenia, mental health centres are established in primary care units, separate for adults and children. NIJZ organised capacity building for professionals who provide support to refugees. However, many refugees were not aware of available mental health services, while others chose not to use them, often saying recent arrivals needed them more. Furthermore, group sessions were unappealing, and young people struggled to find suitable services.
 - The study proposed new approaches to mental health care, such as engaging Ukrainian mental health professionals. With the medical chamber NIJZ is working to allow Ukrainian professionals to work in Slovenian health sector.

- People don't understand many things about health care, how prescriptions work, etc. People don't know how to access websites developed to support them. Now NIJZ are printing booklets with QR codes.
- More information on the [experiences and lessons learnt in Slovenia, see PPT presentation](#).

3. EU initiatives in support of mental health of Ukrainian refugees

Presented by Dorota Sienkiewicz, Policy Manager, EuroHealthNet.

The [presentation](#) consisted of an overview of recent EU initiatives focused on supporting EU member states and neighboring countries in the provision of mental health related services.

- European Commission's Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR) mobilised EUR 9 million from the EU4Health Programme to assist people fleeing Ukraine in urgent need of mental health and trauma support services.
 - E.g. investments to provide mental health services in the form of psychological first aid, triage, psychological trauma support and counselling to refugees in their own languages.
- European Commission's Directorate-General for Health and Food Safety (DG SANTE) set up an exchange Network 'Supporting Ukraine, neighbouring EU Member States and Moldova' under the EU Health Policy Platform aimed to address the health needs of Ukrainian refugees and displaced persons.
- European Commission is preparing an EU-wide comprehensive approach to mental health in all policies. War in Ukraine is taken in consideration while drafting the strategy.
- Under the EU4Health Programme 2022, [four 2-year projects](#) are funded to implement best practices to improve mental health and psychological wellbeing in migrant and refugee populations:
 - [MESUR – Mental Health Support for Ukrainian Refugees](#) - facilitate immediate mental health treatment for displaced persons with depression, PTSD, addressing the care gap in PL, DE, HU, BG, EL, EE; UE/RU language digital, evidence-based intervention tool; train health professionals.
 - [PEACE of MIND](#) - innovative, scalable and evidence-based approach to strengthen the mental health and psychological wellbeing of refugees and displaced people.
 - [U-RISE - Ukraine's displaced people in the EU: Reach out, Implement, Scale-up and Evaluate interventions promoting mental wellbeing](#) – mental health, face-to-face interventions adapted to the specific and diverse needs of refugees in SK, PL, RO; scale up and transfer interventions across the EU; Mobilize European network of UE/RU-speaking mental health professionals;
 - [Well-U - Promoting the mental health and psychosocial wellbeing of refugee children and their caregivers through lay professionals amidst the Ukraine's displacement](#)

[crisis](#) - series of universal preventative mental health and psychosocial support measures, trainings, practice and knowledge dissemination in EL, HU, IT, RO.

Related resources:

- EuroHealthNet PowerPoint slides on [EU initiatives in support of mental health of Ukrainian refugees in response to Ukraine crisis](#).
- National Institute of Health in Slovenia PowerPoint slides on [experiences and lessons learnt in Slovenia](#).
- Based on the findings of the webinar, EuroHealthNet and SEEHN published a [statement](#), calling for integrated, coordinated and forward-looking action on recovery-oriented mental health of Ukrainian refugees as the war continues

For more information click [this link](#).

4. Closing remarks

The chairs of the meeting thanked the participants for their contribution and announced that based on the findings of the webinar, EuroHealthNet and SEEHN will publish a [statement](#), calling for integrated, coordinated and forward-looking action on recovery-oriented mental health of Ukrainian refugees as the war continues.

In summary, the Roundtable brought attention to the need to share and apply the collective knowledge and continue improving skills and capacities on how to work in multi-disciplinary ways to strengthen resilience and mental health across sectors. The experts called for explicit prioritisation of investments in children and adolescents' mental health and psychosocial wellbeing in view of preventing prolonged and intergenerational transmission of war-related trauma. Likewise, providing continued support to daily living and working conditions of those who are directly affected, their carers, and investing in providing training for non-health professionals and volunteers in community-based settings was clearly highlighted. This also includes encouraging social inclusion, employment, material security, and inclusive education and care for those most in need.

Public health agencies across Europe, particularly from Ukraine's neighbouring countries, continue their efforts to ensure positive mental health and psychosocial wellbeing for the over eight million Ukrainians displaced by the war. Existing and ongoing support from the EU as well as from international organisations and partnerships like EuroHealthNet and SEEHN are valuable to enable exchange of good practices and strengthen capacities to identify and address mental health needs. Last but not least, the upcoming EU mental health initiative should also include dedicated support to addressing the mental health of the Ukrainian refugees.