

Responding to Mental Health and Psychosocial Support (MHPSS) needs in Ukraine and affected countries:

Key considerations when offering help remotely/online

There is an increasing number of mental health professionals and others who want to help remotely. A high percentage of affected populations have access to smartphones and online technology such as apps or chatbots. There are some important considerations to ensure such help is provided efficiently and safely

- 1) **Act together and collaborate.** Do not offer your help in isolation. Join an organization already involved in providing MHPSS services, including existing helplines or online services. This is especially important if your assistance will be for a limited period, or if you are unsure how long you will be involved in the response
- 2) **Coordinate** your work within the broader MHPSS response. **Obtain** updated information on what MHPSS actors (agencies and actors dedicated to the provision of Mental Health and Psychosocial Support in emergencies) are already doing to complement and strengthen existing efforts. **Regularly share** information about your organizations' plans and activities with MHPSS Technical Working Groups to be included in updated MHPSS mappings. The [IASC MHPSS Reference Group](#) supports this coordination among agencies. You can connect with the Reference Group via mhpss.refgroup@gmail.com.
- 3) **Use [global guidelines and tools](#)** when choosing what kind of support to offer (e.g. [Psychological First Aid](#), [Basic Psychosocial Skills](#), evidence based psychological interventions, [remote support best practices](#)). Do not offer interventions that do not have an evidence base or that can be harmful such as single session psychological debriefing. [These guidelines](#) contain in their introduction very important information on the provision of MHPSS in emergencies.
- 4) Provide any mental health and psychosocial support **free of charge** to ensure accessibility to all.
- 5) **Know about other services and supports** that are being provided in Ukraine and in affected countries where people are displaced. Have a list of up-to-date contacts and resources available/online to share with people who need additional support (e.g. mental health services, social welfare, legal services, family tracing programmes, child protection, gender based violence protection, health).
- 6) Safeguard **anonymity where appropriate and ensure confidentiality of service users** (e.g. do not require personal identifying information). When possible, use secure communications platforms (eg. [end-to-end encrypted services](#)).
- 7) Ensure adequate **qualifications, competencies, supervision** and oversight of staff/volunteers. This includes being able to respond to a person in **crisis** (e.g. thoughts or plans about suicide or self harm) and receiving support from a supervisor if needed
- 8) Take **cultural and language considerations** into account. Information about the kind of help offered should be available in Ukrainian and persons on any helpline should speak relevant languages (rather than work through a translator) and be very familiar with the culture and context.
- 9) Have a mechanism to collect **anonymous feedback** (e.g. ratings, free text) and use this information to optimize support.
- 10) **Take care of the wellbeing of staff and volunteers.** Although support is provided remotely, it can still be stressful and upsetting to hear about situations of great suffering. Make sure staff/volunteers can take breaks, engage in self-care, and get emotional support from peers, and ensure supervisors check in regularly to ask how they are doing.
- 11) Orient and update yourself about the humanitarian situation and response. For the situation in Ukraine, visit <https://www.unocha.org/ukraine>. For the situation of Ukrainian refugees, visit the operational data portal for the Ukraine Refugee Situation: <http://data2.unhcr.org/en/situations/ukraine>

Key Contacts:

- Email mhpss.refgroup@gmail.com to subscribe to the IASC MHPSS mail out and receive regular updates about the MHPSS response and to share information about your planned or current activities.

Guidance and Resources:

- [IASC \(2007\). Guidelines on Mental Health and Psychosocial Support in Emergency Settings](#)
- [IFRC \(2020\). Volunteering in response to COVID-19: spontaneous volunteers. IFRC Reference Centre for Psychosocial Support, Copenhagen.](#)

- [IASC \(2020\). Operational considerations for multisectoral mental health and psychosocial support programmes during the COVID-19 pandemic](#) (e.g. see section 2.3 CONSIDERATIONS WHEN PREPARING SERVICE ADAPTATION FOR COVID-19 SCENARIOS)
- Nancy Baron (2019). [Training of Mental Health Volunteers to Answer Helplines Responding to Patients in Covid-19 Isolation Units.](#)
- [WHO \(2018\). Preventing suicide: a resource for establishing a crisis line.](#) Geneva: World Health Organization; 2018
- PAHO (2020). [Remote delivery of Mental Health and Psychosocial \(MHPSS \) Interventions](#)
- Queen Mary University London (2020) Guidance for the delivery of psychological therapy to children by phone.
- [World Health Organization, War Trauma Foundation and World Vision International \(2011\). Psychological first aid: Guide for field workers. WHO: Geneva.](#)
- [IMC free online learning on Principles of Psychological First Aid](#)
- WHO, UNICEF, UNHCR and UNFPA (2022 Draft). The Mental Health and Psychosocial Support Minimum Service Package: <https://mhpsmsp.org/en> (see sections on 2.3 Care for staff and volunteers providing MHPSS, 2.4 Support MHPSS competencies of staff and volunteers, 3.2 Orient frontline workers and community leaders in basic psychosocial support skills, 3.3 Disseminate key messages to promote mental health and psychosocial well-being, 3.12 Initiate or strengthen the provision of psychological interventions)
- [UNODC. Caring for your child in crisis situations.](#)