

NATIONAL CONFERENCE ON MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

SEARCHING FOR SOLUTIONS AND JOURNEYS LEADING TO A COMPREHENSIVE MHPSS SYSTEM FOR PEOPLE AFFECTED BY THE CRISIS

Oponice, 15–16 November 2023

The conference created space for discussing the needs of people affected by the crisis, be it individual demanding life situations, humanitarian emergencies or the consequences of war or natural disasters, from different views and perspectives.

We ask ourselves what we can do together for people in crisis situations, and we search for ways to be there for them in demanding situations and accompany them until they are able to take care of themselves.

What needs to be done?

It is vital to include mental health and psychosocial support services in the portfolio of public services in demanding situations and integrate these services into the system of providing basic services of health, social support, education and other relevant areas so that they are available at the individual, community and national level. This requires the incorporation of the philosophy of support services available to all people in demanding situations into policies and national programmes, systematic collection of data on needs and responding services, participatory resource planning, efficient coordination at national level, methodological, educational and supervisory support for service providers, and intervention programmes directly responding to the needs, including early and crisis intervention and other support programmes based on scientific evidence.

Slovakia should consider providing mental health and psychosocial support services (MHPSS) in demanding situations as an available form of support, opening up space for building the capacities for services at all levels of the MHPSS intervention pyramid. This commitment should be transôated into national policies, mental health care reform strategies and other relevant strategic frameworks.





Our ability to manage crises and disasters will be strengthened by the systematic planning of sources and interventions and by building the capacities of MHPSS services for crisis situations (in the context of civil protection and the state of crisis at the national, regional and local level), which will take into account both the mandate and the actual costs of players who are able to help including crisis intervention, psychological first aid, community mental health services and integrated psychosocial support.

Apart from **catastrophes and crises**, MHPSS services should also be available to the public at the **individual, group, community and national levels** in **demanding life situations**, which requires the systematic building of support background in order to preserve the sustainability and further development of these services. The subjects of mental health need to be looked upon from the level of individual crisis management tools (self-care management, peer support), group support systems in the community, professional and specialised mental health support services for vulnerable groups with special needs (long-term health, psychotherapeutic or social care and professional support). One must not forget the need for psychohygiene and mental health care for providers of these services (caring for carers) in the form of intravision and supervision support by other experts in the field of mental health because the personality is their working tool, which needs to be permanently developed and taken care of.



We **encourage the government of the Slovak Republic** to address the area of mental health, promote it and take up an active stance in the following steps:

- 1) At the level of optimization of national policies, continue the transposition of international standards and acquired experience so that we can transform them at the ministries into the development of more effective public policies to support mental health; optimize crisis management and support for people affected by the crisis; strengthen the institutional capacities of national players and develop permanent coordination mechanism facilitating informed decision-making on interventions in crisis situations, interdepartmental cooperation and interaction with partner organisations involved in mitigating the effects of adverse events. Capacity strengthening should also include the appointment of specific representatives (officers – executives) for the area of mental health, especially at the Ministry of Labour, Social Affairs and Family, the Ministry of Education, Science, Research and Sport, and the Ministry of Justice, and for the area of health care for refugees and migrants at the Ministry of Health.
- 2) Create a Committee for Mental Health and Psychosocial Support Services (MHPSS) as a new tool for supporting crisis interventions, coordinating individual players and integrating field experience. The government should take the steps necessary to increase the efficiency of the activities of the Council and its relevant committees and to ensure timely access to those who decide on their recommendations.
- 3) With reference to the existence of the National Mental Health Programme, recommendations developed based on the analyses of needs in the area of mental health from individual departments and WHO recommendations supplementing the draft strategic goals and action plan for the development of the national programme, we appeal to the necessity to support their implementation, to create financial mechanisms to support reform and innovative projects and allocate funds for a realistic assessment of the current state and measures to support a functional and sustainable system of funding mental health services.

The aforementioned goals can be met through **specific prevention and intervention programmes addressable** according to various criteria, such as:

- Target groups – according to age, type of threat (particular situations and threats, individual crises resulting from life cycles or undesirable events, such as shooting/family or community violence, natural or man-made disasters: earthquake, flood, technological disasters, etc.), or according to the vulnerability of people with special needs (people with disabilities, members of marginalised communities, migrants and refugees, people affected by intergenerational poverty, etc.);
- Areas of necessary interventions: public health, gender-based, domestic or sexual violence, human trafficking, suicide prevention, integration into support systems (inclusive education, social services, entry into the labour market, etc.);
- Socio-cultural contexts: family, school, workplace, community services, leisure activities supporting mental health, social media (e.g. cyberbullying).

With respect to the **human rights** of refugees from Ukraine, we ask the government of the Slovak Republic to address the following urgent issues:



- First of all, the government, in cooperation with the Ministry of Labour, Social Affairs and Family of the SR, should accept the offer of the EU to **extend the EU-CARE programme**, ideally in the form of a national project implemented through the IMPLEA (Implementation Agency of the Ministry of Labour, Social Affairs and Family of the SR as the Intermediary Body under the managing Authority for EU programmes). The European Commission offers the EU-CARE program for a period of six years to address challenges related to migrants, refugees, asylum seekers, etc. The Slovak Republic will definitely need to address this topic, so it would be unreasonable not to use this form of assistance. According to our information, the sources of the UN agencies (including UNICEF, UNHCR, IOM, and WHO) intended to support interventions in connection with the impacts of war conflict in Ukraine will significantly decrease next year. Through resources from the EU CARE mechanism, the state could adjust the form and results of support for refugees, migrants and asylum seekers in favour of vulnerable groups, society and relevant international obligations and strategic goals.

- In the area of basic services, it is necessary to continuously evaluate the availability of services necessary to ensure basic needs and rights (including basic forms of integration support, social supervision and support for disadvantaged and particularly vulnerable people, health care from the birth to palliative care), and in case of system failures and insufficient capacities, implement corrective measures.

- Further assistance in the field of human rights should focus on refugee children, i.e. the support of **inclusive education**. It is necessary to increase capacities enabling the inclusion of all minor refugees in the education system, intensify the training of teachers working with refugee children, provide Ukrainian-speaking school assistants from among female immigrants from Ukraine, provide for the diagnosis and fulfilment of special needs of children from Ukraine, including the possibility of setting up an individual study plan for children with learning disabilities or other special educational needs in cooperation with licensed school counselling centres (school facilities in the network of schools of the Ministry of Education, Science, Research and Sport of the Slovak Republic) and multidisciplinary teams at schools throughout Slovakia. Based on our own experience, we can clearly identify the needs of these children and the measures that need to be taken to minimise the costs.

Employing people who have fled Ukraine, notably **qualified** labour (e.g. doctors and paramedics), still remains a significant problem. The reasons include a lengthy and costly degree recognition, professional practice and examination. This is caused by differences in the education of doctors in Ukraine and Slovakia and the need for intensive language training and financing of long-term internships (under the supervision of Slovak health workers) in health facilities. Based on five individual cases of a general practitioner for adults, a paediatrician, a physiotherapist, a psychiatrist and a psychologist, their education, qualification, and practice documents, we can illustrate how **difficult it is to complete the qualification** and provide independent health care in Slovakia.

- Housing, as a basic need, still remains a problem: many refugees still live in large-capacity centres (ghettoisation) or in unsuitable rental conditions without the possibility of starting an independent life in rental flats due to limited finances and increasing poverty.

As organisations focusing on various aspects of mental health, we believe that addressing these challenges will make our society stronger, healthier and more resistant to the effects of crisis situations.



Helping people in need has always been a significant part of our national culture. The ability to protect human lives, maintain a dignified quality of life for everyone and give a chance to start a new life to those who experienced the violence of war, bear its consequences and seek safety in our country shows the strength of our society, the sustainability of our way of life in the midst of various threats and responsible and sustainable state administration. We would like to thank you for your willingness to address these crucial topics.

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TENENET is a civil association established in 2011 in Senec as a sheltered workshop helping people with disabilities and the long-term unemployed. Over the last 12 years, it has expanded the range of its activities; currently, it has branches in western, central and eastern Slovakia and plans to expand further.

TENENET also include:

Centre for Children and Families

Outpatient's Department of Clinical Psychology and Psychotherapy

Centre for Counselling and Prevention in the Area of School Psychology, Speech Therapy and Special Pedagogy

Community Centre and Specialised Social Counselling

Centre for Early Intervention for Children with Disabilities

Supported Employment in the Social Economy

In line with the motto "Helping to grow, growing together", TENENET lends a helping hand to families so that they can overcome demanding life situations caused by financial problems, job loss, social isolation, learning disabilities, substance abuse or mental health disorders.

By working with experts, building strong partnerships and developing innovative solutions, TENENET brings positive change in crucial topics, such as mental health, social inclusion and education. The concept of the civil association is unique: connecting school, social, health and justice departments, it provides families with full-service support.

In 2022, TENENET provided services to almost 9,000 clients and, after the outbreak of armed conflict in Ukraine, counselling to nearly 95,000 refugees. The organisation gave employment to dozens of refugees with degrees in psychology and education, who have helped their compatriots cope with hardship associated with the consequences of war.

TENENET is a member of many reputable national and international institutions, such as the European Association of Service Providers for Persons with Disabilities (EASPD), SocioFórum, o.z., – Slovak Union of Supported Employment (SÚPZ), – Association of Supervisors and Social Counselors (ASSP) or the American Chamber of Commerce in Slovakia (AmCham).

