



UKRAINE AND IMPACTED COUNTRIES

December 2023



**NAVIGATING NEW GROUNDS - THE PSYCHOLOGICAL
CONSEQUENCES OF DISPLACEMENT**

INTRODUCTION

PURPOSE OF THE STUDY

The psychological scars of displacement can be as profound as the physical ones. Refugees often face immense dramatically and critically stressful events, not just from the reasons leading to their displacement but also from the journey and challenges that come after. Coupled with the loss of one's home, community, and familiar environment, this negative experience can severely impact their psychosocial well-being. Refugees often face various problems and stressors in a new place of residence. Stressors such as separation from family members and support networks, unemployment, poor

socioeconomic conditions, barriers to accessing health care and other services can increase the risk of developing mental health conditions and also exacerbate pre-existing social and mental health problems. The Red Cross, in its mission to holistically support individuals in distress, recognizes the importance of addressing these situations. This study was, therefore, designed to identify the specific psychosocial challenges and needs faced by Ukrainian refugees in Ukraine and neighbouring countries. By pinpointing these areas, we can design interventions that cater to these immediate needs.

“Disasters and emergencies take an immense toll not only on people’s physical health, but on their mental health and wellbeing too. Addressing global mental health and psychosocial needs is a vital part of the IFRC’s work supporting healthy communities.” [[IFRC Reference Centre for Psychosocial Support](#)]



SCOPE AND LIMITATIONS OF THE DATA COLLECTION

The data collection for this study was channelled through the META platform, but the survey itself was deployed directly to the IFRC's Kobo toolbox secure account, a platform known for its emphasis on data security and participant confidentiality. This dual-platform approach combined the wide reach and accessibility of META with the robust security features of the Kobo toolbox. As a result, while we were able to tap into a broader segment of Ukrainian refugees both within Ukraine and neighbouring countries, we also ensured that their data remained secure and their privacy uncompromised. The user-friendly nature of both platforms aimed to make

participation straightforward, regardless of a participant's tech proficiency. However, there are inherent limitations to consider. The digital method might have unintentionally excluded refugees without internet access, who don't use the META platform, or social media in general. Additionally, while the digital survey captured quantitative data efficiently, certain nuances and depth of personal experiences that might be evident in face-to-face interviews could have been missed. And though our platforms aimed for inclusivity, there's a potential sampling bias favouring younger, tech-savvy respondents.

ETHICAL CONSIDERATIONS AND DATA PRIVACY

Ensuring the ethical integrity of this study was of paramount importance to us, especially given the sensitive nature of the experiences shared by Ukrainian refugees. All participants were assured of complete anonymity, with no personally identifiable information being collected or stored. Instead, unique identifiers were used to maintain the privacy of each respondent. The data was securely stored on the IFRC's Kobo server, ensuring that the information remains confidential and protected against any

unauthorised access. Furthermore, recognizing the potentially distressing nature of some survey questions, participants were explicitly informed that they held the right to skip any question they felt uncomfortable with, without any repercussions. This approach aimed not only to safeguard their emotional well-being but also to foster a trusting environment where participants felt respected and empowered throughout the data collection process.

ELIGIBILITY CRITERIA AND DATA COLLECTION PROCESS

Capitalising on our partnership with META, the survey was actively promoted across META platforms to reach a vast and diverse audience. Firstly, all participants had to be active users of any of the META platforms. This ensured a direct link to the community and simplified the promotion and distribution of our survey. Secondly, every participant needed to express explicit consent to participate in the study, emphasising our commitment to ethical research practices. Lastly, only Ukrainian citizens above the age of 18 were considered, ensuring that the feedback was from mature individuals. As for the timeline, the data was collected during September 2023.



*Cover photo: IFRC, Hungarian Red Cross
Photo: Ukrainian Red Cross Society*

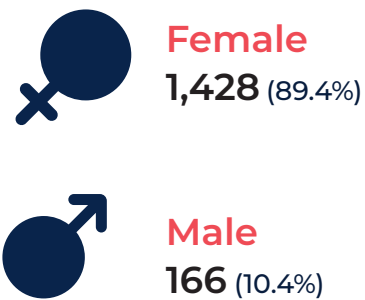
DEMOGRAPHICS

RESPONSE AND ELIGIBILITY

From a total of 1,865 responses received, an eligibility check ensured the quality and relevance of the data - as per our criteria, 1,640 respondents gave their consent, 1,632 were aged 18 and above, and 1,597 confirmed Ukraine as their country of origin. The number of people who responded affirmatively to all three questions - 1,597 - formed the basis for this analysis.

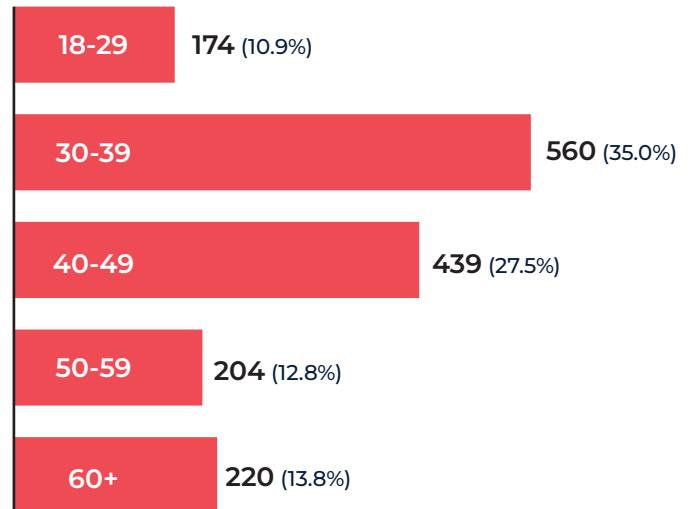
GENDER DISTRIBUTION

The majority of respondents identified as female, constituting 89.4% (1,428) of the total analysed responses. Males represented 10.4% (166) of the participants. Given the small male representation, gender disaggregation will not be employed in this analysis. An additional 0.2% (3) identified under the 'Other' category.

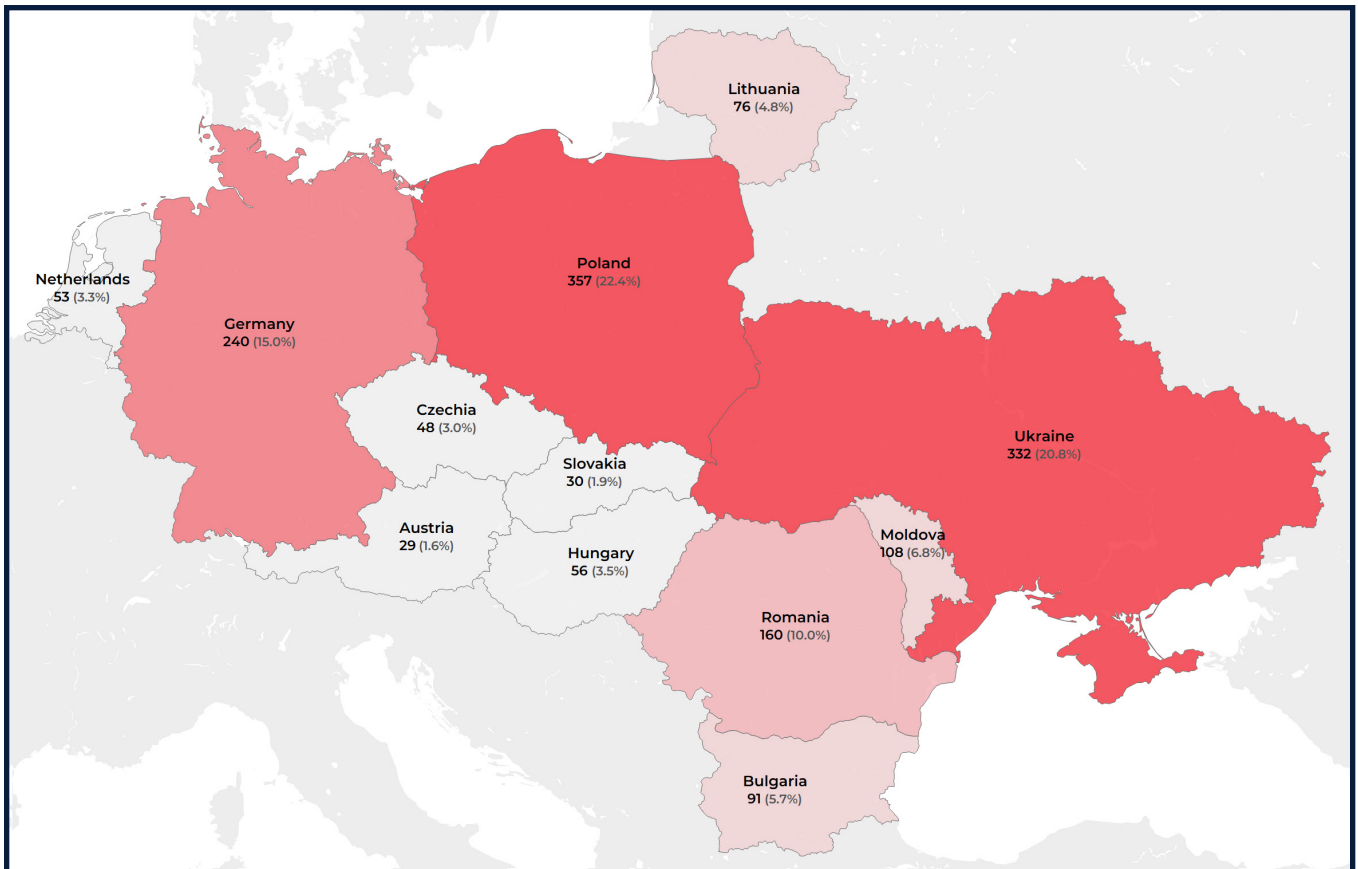


AGE DISTRIBUTION

A significant 35.0% (560) of the respondents fall within the age bracket of 30-39 years. Close behind, 27.5% (439) are between 40-49 years. The younger generation, those aged between 18-29, constitute 10.9% (174) of the participants, suggesting that while many young adults chose to move, they might not be the dominant group among refugees, at the same time, this might also be impacted by the general demographics of social media users. The older age groups, 50-59 years and 60 years and above, represent 12.8% (204) and 13.8% (220) respectively, shedding light on the resilience and challenges faced by older generations amidst such crises.



COUNTRY OF RESIDENCE



The distribution of Ukrainian refugees across various countries showcases the patterns of movement and perhaps the perceived places of refuge and opportunity. Poland emerges as the top host country, accommodating 22.4% (357) of the respondents, possibly due to its geographical proximity and cultural ties. Ukraine itself has 20.8% (332) of the respondents, indicating a sizable internal displacement where individuals have moved to safer regions within the nation. Germany, with its history of supporting refugees and known for its robust social welfare system, is the residence of 15.0% (240) of the participants. Romania, another neighbouring country, has become home to 10.0% (160) of the respondents. Further down the list, we find countries like Moldova, Bulgaria, and Lithuania hosting between 4.8% to 6.8% of the respondents, showing that the refugee dispersion is truly European-wide. Countries like Hungary, Netherlands, Czechia, Slovakia, and Austria are also playing their part, albeit with smaller percentages. The 'Other' category at 1.1% (17) could represent a mix of countries beyond the primary European nations, indicating a far-reaching impact and response to the Ukrainian refugee crisis.

DURATION OF STAY IN THE CURRENT COUNTRY OF RESIDENCE

Including Ukraine:

- More than 18 months: 37.4% (598)
- 12-18 months: 41.3% (660)
- 6-12 months: 13.7% (218)
- Less than 6 months: 7.6% (121)

Excluding Ukraine:

- More than 18 months: 28.0% (354)
- 12-18 months: 50.3% (636)
- 6-12 months: 15.3% (194)
- Less than 6 months: 6.4% (81)

These numbers may indicate that a significant portion of refugees have lived in their current residence for over a year. This trend suggests that many refugees have achieved a degree of settlement in their host countries. However, the data doesn't capture the intricacies of in-country displacement or short-term displacement flows to and from Ukraine, which may provide deeper insights into the refugees' patterns of movement and choices.

LIVING ARRANGEMENTS OF UKRAINIAN REFUGEES

Child-centric households: A notable number of refugees live in households centred around children.

- 28.6% (457) live with one child below the age of 18.
- 23.1% (369) reside with two children below the age of 18.
- 10.8% (172) live with more than two children below this age.

In total, 62.5% (998) of respondents live with at least one child below the age of 18, emphasising the prominence of families with younger children among the refugee population. This finding can have significant implications for host countries in terms of educational and childcare provisions.

Partnered living: 27.1% (433) of respondents live with their spouse or partner. This suggests that a sizable proportion of the refugees have managed to relocate with their significant others, potentially providing mutual emotional and logistical support in the face of challenges.

Elders in the household: 14.0% (224) of the displaced people from Ukraine live with their parents. This statistic highlights multi-generational households, where the presence of elders may introduce unique needs, from healthcare considerations to potential language barriers.

Living alone: 13.0% (208) of respondents live alone. This figure draws attention to a segment of refugees who might lack immediate familial support in their host countries, potentially elevating their need for community outreach and social integration initiatives. 74 persons aged 60 or above (33.6% of this age group) reported living alone - older adults may have specific health and mobility issues, making them more vulnerable, especially when living alone. In addition, they might face challenges in accessing services, whether due to mobility issues, technological barriers, or language and cultural differences.

Households with adult children: 8.2% (131) of the respondents live with children who are at least 18 years old. These might be young adults who, due to the challenges back home, are still dependent on their parents or choose to stay close for mutual support.

Shared living with non-relatives: 5.6% (90) of the respondents live with people who are not their relatives. This could indicate shared housing arrangements, perhaps driven by economic reasons, or the formation of new support communities within the refugee population.

PERSONAL BELIEFS AND EXPERIENCES

EXPERIENCE OF STRESSFUL OR TRAUMATIC EVENTS

“Have you or your family members currently living with you experienced any stressful or traumatic events due to the situation in Ukraine?”

The gravity of the situation in Ukraine and its subsequent effects on its citizens, specifically refugees, becomes evident when examining the experiences of stressful or traumatic events.

- **Highly affected:** A significant 83.3% (1,318) of the respondents confirmed that they or their family members currently living with them had faced stressful or traumatic events owing to the ongoing situation. This percentage underscores the enormity of the crisis, emphasising the importance of mental health and psychosocial support interventions for a majority of the refugee population.
- **Unaffected minority:** A comparatively smaller segment, 8.0% (127) indicated that they did not experience any stressful or traumatic events. This could be attributed to a myriad of reasons, ranging from their location during the crisis, individual resilience, or access to support structures.
- **Ambiguous responses:** 8.7% (138) of respondents were uncertain if their experiences qualified as stressful or traumatic. This group could benefit from counselling or mental health awareness initiatives.

“My daughter was just a baby when we fled Kharkiv in the spring. It’s been almost a year and she’s a big girl now. Our journey out of Ukraine last year was long and she got sick with a terrible fever. We had to spend three days in Lviv. It was very stressful. When I arrived in Hungary, I didn’t know where to go or what to do”.

After a harrowing week-long journey to Budapest, Alissa and her daughter found information from a Red Cross volunteer about ways the organization could help.

Photo: American Red Cross



PERCEIVED IMPACT OF DISPLACEMENT

“Do you think that the displacement had an impact on you and your family members?”

Predominantly negative: The bulk of the respondents felt the weight of displacement, with 33.5% (514) believing it had a substantial negative impact, and an almost identical 33.9% (520) expressing it negatively impacted them. Cumulatively, over two-thirds (67.4%) of the participants viewed the displacement as detrimental to them and their families. Such figures reiterate the need for comprehensive support systems, encompassing economic, social, and psychological facets.

Neutral to positive: A contrasting view emerges with 8.3% (127) of respondents feeling that forced displacement wasn't a significant issue for them. This perspective may originate from individuals who found better opportunities or safety in their host countries, or simply adapt quickly to new environments.

Silver lining: Interestingly, almost a quarter, 24.3% (374) of the participants, felt that there were positive aspects to the forced displacement. This segment might include individuals who experienced personal growth, new opportunities, or strengthened family bonds during the displacement. Their experiences can provide valuable insights for designing refugee support and integration programs, focusing on leveraging the positives.

Initially, individuals who have been in the country for less than 6 months report the highest rate of feeling substantially negatively impacted (38.7%), which may reflect the immediate challenges and uncertainties faced upon arrival. However, this figure decreases slightly for those who have stayed between 6 to 12 months and 12 to 18 months,

indicating that as refugees begin to settle and adapt, the intensity of their negative perception may lessen to some degree. However, it might also mean that those with negative experiences decided to relocate to another country or return to Ukraine.

Interestingly, for those who have been in the country for more than 18 months, the rate of substantial negative impact rises again to 36.0%, hinting at the possibility that longer-term challenges or the enduring nature of displacement might resurface or become more apparent over time. This might also indicate that the people who left Ukraine first and have been in host countries the longest are from the most affected areas and were forced to leave quickly with the least preparation and resources, and/or have the fewest options for returning home.

Conversely, the perception of positive aspects to displacement peaks among individuals who have been in the host country for 12 to 18 months (26.0%) but is less for newcomers and those who have stayed for over 18 months. This could suggest an adaptation phase where individuals find some benefits or silver linings after the initial adjustment period but may face new or ongoing challenges as their displacement extends beyond 18 months.

The category “It's not a big deal” remains the minority view across all timeframes, but it increases slightly with the length of stay, potentially indicating a gradual acceptance or adaptation to the new circumstances over time.

THE BIGGEST SOURCES OF STRESS

"In your current situation, what do you consider your biggest sources of stress?"

Situation-centric worries:

- **Situation in Ukraine:** The overall situation in Ukraine emerges as the primary source of stress, with 58.5% (932) of the respondents selecting it. This underscores the broader geopolitical concerns that continue to weigh heavily on the minds of individuals.
- **My/My family's uncertain future:** Close behind, 48.7% (776) are anxious about the uncertain future they and their families face, emphasising the insecurity brought about by displacement.
- **Concern for loved ones:** Worries for loved ones who remained in Ukraine concern 39.7% (632) of the participants, revealing the emotional toll of separation.

Economic and livelihood stressors:

- **General financial struggles:** Economic hardships are evident, with 33.6% (536) facing general financial struggles.
- **Paying for rent:** Housing emerges as a significant concern, with 23.4% (374) stressed about covering rent costs.
- **Finding a job/income:** The need for stable employment is a stressor for 14.0% (223), highlighting the challenges of economic integration.
- **Paying for food:** 7.5% (120) respondents find the basic practicalities of day-to-day living, like being able to afford food, concerning.

Health and well-being:

- **Mental health:** Mental health concerns are prominent, with 23.43% (372) flagging it as a primary stressor.
- **Physical health issues:** Physical health worries affect 19.2% (306), possibly exacerbated by displacement and uncertain living conditions.
- **Children's well-being:** The well-being of children is a major source of anxiety for 27.5% (438), spotlighting the heightened vulnerability of younger family members.

Integration and settlement challenges:

- **Integrating into a new community and setting up a new life:** 17.9% (285) of the respondents indicated stress stemming from the challenges of integrating into new communities and establishing a new life.
- **Education for children and Childcare:** The education of their offspring concerns 12.0% (191) of the respondents (childcare - 4.1%, 66), emphasising the significance of educational infrastructure and support for the younger generation.
- **Finding an apartment:** For 6.6% (105) respondents, the difficulty and source of stress was not just leaving one's home country, but also the challenges of finding new housing.
- **Discrimination:** Though it's a smaller percentage, 4.8% (76), it's worth noting that some refugees are feeling the effects of discrimination in their new environments.

COPING WITH STRESS

“Since the crisis started, how do you usually cope with stress?”

The results indicate a universal preference for communication with friends and family as primary coping mechanisms. The high preference for online communication (talking to friends and family online) indicates the importance of digital connectivity for refugees in maintaining social ties and emotional well-being. Walking and doing sports or physical activities are popular coping mechanisms, indicating the importance of physical well-being in managing stress. Similarly, focus on creative work helps respondents reduce stress by providing an outlet for self-expression as well as distraction from stressors, it also enhances a sense of accomplishment and relaxation.

It's evident that positive strategies, encompassing activities like walking, communication, and creative pursuits, resonate with a broader

segment. However, there's a subset that leans towards negative coping strategies. This includes potentially harmful behaviours such as substance use and avoidance tactics (notably, the younger demographic (18-29) displayed a higher inclination towards sleep, drinking alcohol, and ignoring the challenges). This disparity underscores the importance of fostering environments and resources that promote positive coping mechanisms, while also addressing the underlying causes that might push individuals towards negative coping behaviours. In addition, low percentage of people reporting accessing professional counselling suggest either a lack of awareness, accessibility issues, or cultural stigmas associated with seeking professional psychological help.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
Walking	59 (33.9%)	247 (44.3%)	205 (47.0%)	87 (43.3%)	90 (41.5%)
Talking to friends and family online	63 (36.2%)	176 (31.5%)	176 (40.4%)	78 (38.8%)	68 (31.3%)
Talking to friends and family in person	48 (27.6%)	206 (36.9%)	128 (29.4%)	79 (39.3%)	86 (39.6%)
Spending time with family and friends	55 (31.6%)	189 (33.9%)	130 (29.8%)	60 (29.9%)	56 (25.8%)
Sleeping	62 (35.6%)	146 (26.2%)	101 (23.2%)	33 (16.4%)	31 (14.3%)
Taking sedatives (including herbal remedies)	35 (20.1%)	104 (18.6%)	81 (18.6%)	35 (17.4%)	24 (11.1%)
Doing sports/physical activity myself	36 (20.7%)	92 (16.5%)	68 (15.6%)	30 (14.9%)	24 (11.1%)
Doing creative work myself	17 (9.8%)	67 (12.0%)	78 (17.9%)	29 (14.4%)	26 (12.0%)
Seeing a psychologist	10 (5.7%)	59 (10.6%)	42 (9.6%)	13 (6.5%)	16 (7.4%)
Other	21 (12.1%)	36 (6.5%)	40 (9.2%)	24 (11.9%)	14 (6.5%)
Drinking alcohol	25 (14.4%)	44 (7.9%)	29 (6.7%)	11 (5.5%)	3 (1.4%)
Attending creative classes	3 (1.7%)	39 (7.0%)	28 (6.4%)	15 (7.5%)	25 (11.5%)
Ignoring the challenges (they will go away on their own)	25 (14.4%)	33 (5.9%)	22 (5.0%)	8 (4.0%)	9 (4.1%)
Using online self-help resources	10 (5.7%)	34 (6.1%)	25 (5.7%)	11 (5.5%)	14 (6.5%)
Attending sport classes	8 (4.6%)	41 (7.3%)	27 (6.2%)	10 (5.0%)	5 (2.3%)
Being active in online chat groups	7 (4.0%)	17 (3.0%)	11 (2.5%)	4 (2.0%)	12 (5.5%)
Online counselling	6 (3.4%)	22 (3.9%)	12 (2.8%)	3 (1.5%)	3 (1.4%)
Participating in group counselling sessions	1 (0.6%)	16 (2.9%)	11 (2.5%)	7 (3.5%)	6 (2.8%)
Using telephone hotlines	0 (0.0%)	5 (0.9%)	3 (0.7%)	1 (0.5%)	5 (2.3%)
Using illegal substances	3 (1.7%)	1 (0.2%)	1 (0.2%)	0 (0.0%)	0 (0.0%)

Multiple-choice question, % do not sum up to 100%.

PERCEPTION OF MENTAL HEALTH

“What does it mean to you to be mentally healthy?”

The survey reveals a progressive understanding of mental health among Ukrainian refugees, with a majority associating it with emotional well-being and effective coping mechanisms. While younger age groups emphasised the importance of mental health as being equivalent to physical health, there was a noticeable decrease in this sentiment among older participants. This underscores the need for continued mental health education and awareness, especially among older populations.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
It means having good emotional and psychological well-being	125 (71.8%)	398 (71.1%)	317 (72.2%)	130 (63.7%)	125 (56.8%)
It involves being able to cope with the normal stresses of life	93 (53.4%)	274 (48.9%)	218 (49.7%)	103 (50.5%)	83 (37.7%)
It's just as important as physical health	96 (55.2%)	264 (47.1%)	200 (45.6%)	80 (39.2%)	88 (40.0%)
It refers to being able to deal with negative emotions	72 (41.4%)	189 (33.8%)	128 (29.2%)	65 (31.9%)	63 (28.6%)
It refers to being free from mental disorders	54 (31.0%)	119 (21.3%)	71 (16.2%)	29 (14.2%)	17 (7.7%)
It's something everyone should be aware of and take care of	56 (32.2%)	105 (18.8%)	56 (12.8%)	28 (13.7%)	16 (7.3%)
It is about productivity in work and contribution to the community	39 (22.4%)	80 (14.3%)	78 (17.8%)	23 (11.3%)	18 (8.2%)
I am not sure	16 (9.2%)	25 (4.5%)	13 (3.0%)	7 (3.4%)	10 (4.5%)
It's not as important as physical health	1 (0.6%)	7 (1.3%)	5 (1.1%)	1 (0.5%)	11 (5.0%)
Weaknesses and character flaws people need to take care of	7 (4.0%)	4 (0.7%)	7 (1.6%)	0 (0.0%)	3 (1.4%)
It's an excuse people use for their behaviour	2 (1.1%)	9 (1.6%)	3 (0.7%)	1 (0.5%)	1 (0.5%)
It's a taboo subject or something shameful in my community	2 (1.1%)	0 (0.0%)	1 (0.2%)	1 (0.5%)	2 (0.9%)

Multiple-choice question, % do not sum up to 100%.

General emotional well-being: The majority of respondents across all age groups believed that being mentally healthy means having good emotional and psychological well-being. This sentiment was especially pronounced among the younger age groups, with 71.8% of those aged 18-29, 71.1% of those aged 30-39, and 72.2% of those aged 40-49 endorsing this view.

Coping mechanisms: The ability to cope with the normal stresses of life was another prominent theme. Approximately half of the participants in the 18-29, 30-39, 40-49, and 50-59 age brackets associated mental health with effective coping mechanisms. Only 37.7% respondents aged 60 or above mentioned the same.

Work and community contribution: Fewer respondents linked mental health with productivity at work and contributions to the community. This connection was most notable in the 18-29 age group (22.4%), but significantly less so in the older age groups, with only 8.2% of those 60+ making this association. This might have a connection to the “hussle culture” among the younger generations.

Importance of mental health: A significant portion of respondents, especially in younger age groups, believed that mental health is just as important as physical health. The sentiment was highest among those aged 18-29 at 55.2% and dropped to 40.0% among the oldest respondents group.

Mental disorders: Around 31.00% of the youngest age group (18-29) believed mental health refers to being free from mental disorders. This perspective significantly decreases with age.

Awareness and responsibility: A recurring theme was the belief that everyone should be aware of and take care of their mental health. This sentiment was strongest among the 18-29 age

group (32.24%) but saw a decrease with age, with only 7.3% of those 60+ holding this view.

Uncertainty: A small fraction of participants across all age groups indicated that they were unsure about the definition of mental health. This uncertainty was highest among the 18-29 age group at 9.2%.

PERCEIVED EFFICACY OF SUPPORTIVE ACTIVITIES

“Do you think that activities such as peer support groups, creative or sports activities, and awareness sessions on stress and coping can help people to better cope with high levels of stress due to difficult situations?”

Supportive activities considered beneficial: A substantial 70.3% (1,122 out of 1,597) believe that activities such as peer support groups, creative or sports endeavours, and awareness sessions on stress and coping can effectively help individuals manage heightened stress levels. This dominant perspective indicates a widespread recognition of the therapeutic and rehabilitative potential of such interventions.

Need for more awareness: However, a notable 23.3% (373 out of 1,597) expressed uncertainty regarding the efficacy of these activities. This suggests that while many understand the benefits of these initiatives, there remains a sizable segment of the population that may benefit from further awareness campaigns or educational efforts on the subject.

Minority scepticism: A small fraction, 6.4% (102 out of 1,597), doesn't believe that these activities are beneficial, signalling that there may always be some level of scepticism or personal preferences that diverge from popular opinion.

When families from Ukraine started arriving to the Anenii Noi district, Moldova Red Cross volunteers, Vika and Timur, were helping minors cope with stress and feel calmer by teaching them how to make paper cranes.

Photo: Dumitru Doru/EPA for IFRC



SEEKING PSYCHOLOGICAL SUPPORT

"Since the crisis started, have you sought any form of psychological support in the country you're residing now?"

Substantial number have sought support:

30.1% (474 out of 1,577) of respondents have sought psychological support in their current country of residence since the onset of the crisis. This reveals a tangible demand and recognition of the value of professional mental health services among this group.

But the majority did not seek support:

Despite a significant portion (83%) acknowledging that they (or their cohabitants) have undergone stressful or traumatic experiences due to the conflict, a considerable 69.9% (1,103 out of 1,577) have not sought any psychological support. This might be attributed to various reasons: cultural

stigmas around mental health, lack of access to services, financial constraints, or the belief that they can cope without external help. It would be worthwhile to study these reasons in-depth in order to address them from a programmatic perspective.

Proportion remains consistent: Among those who admitted experiencing traumatic events (1,306 respondents), 32.5% (424) have sought psychological help, while 67.5% (882) haven't. These percentages remain quite similar to the overall group, underscoring that experiencing trauma doesn't necessarily translate to seeking professional help.

ISSUES IDENTIFIED:

While there is a general understanding of the benefits of supportive activities and psychological help, there's a clear gap between those recognizing its importance and those actively seeking it. The considerable portion uncertain about the benefits of supportive activities signifies the need for further awareness campaigns, education, and perhaps testimonials or case studies showcasing the benefits.



RECOMMENDATIONS:

- **Promote an in-depth study** in key countries to find out the possible barriers that people are facing that do not allow them to seek support. Identify and share best practices internationally.
- **Awareness campaigns:** Launch wide-scale awareness campaigns that aim to educate the Ukrainian refugee community about the importance of seeking professional psychological support following traumatic experiences. Use relatable testimonials or case studies that showcase real benefits. This campaign should also include grassroots community strategies to help identify possible barriers (cultural, stigma, etc.).
- **Cultural sensitivity training:** Mental health professionals working with Ukrainian refugees should undergo cultural sensitivity training to understand and navigate potential stigmas around mental health prevalent in Ukrainian culture.
- **Accessible services:** Ensure that psychological services are easily accessible, both geographically and financially. Consider offering free or subsidised sessions, mobile clinics, or online counselling to reach a broader audience.
- Ensure that the NS has clear and **strong networks and referral pathways** to refer people in need of help who cannot be reached by RCRC services.
- **Collaboration with other organisations providing help:** Collaborate with existing organisations that are already trusted within the refugee community. This could accelerate the uptake of psychological services, as the recommendation would come from a trusted source.
- **Psychoeducational workshops:** Host workshops that educate refugees on the signs and symptoms of trauma and stress. Offer coping mechanisms and emphasise the importance of seeking help when overwhelmed.
- **Flexible service models:** Given that a significant portion of refugees might believe they can cope without external help, offer flexible service models such as peer support groups, self-help resources, and community gatherings where they can access help informally.
- **Feedback mechanism:** Establish a system where refugees can provide feedback on mental health services they have accessed. This can give insights into barriers they face or improvements needed.
- **Holistic support approach:** Recognise that psychological health doesn't exist in isolation. Ensure that alongside mental health support, refugees also have access to basic necessities, stable housing, job opportunities, and community integration programs.
- **Language and cultural compatibility:** Ensure that the psychological support offered is linguistically and culturally compatible. This might entail employing professionals who speak the language or understand the cultural nuances of the Ukrainian community.
- **Long-term support plans:** Recognizing that trauma and stress might manifest over time, ensure that there are long-term support plans in place. This includes periodic check-in and follow-ups, as well as a budget secured for future implementations.

ACCESSING PSYCHOSOCIAL SUPPORT

If a person has sought any form of psychological support in the country they are residing.

"Please select the type(s) of support or services you have accessed."

While individual counselling is commonly sought across all age groups, other resources like group counselling, online platforms, and telephone hotlines cater to specific age demographics. As refugees navigate the challenges of displacement, these findings emphasise the importance of offering a variety of psychosocial support options tailored to different age groups and preferences.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
Individual counselling	18 (50.0%)	87 (49.2%)	81 (58.3%)	28 (47.5%)	28 (57.1%)
Online help from Ukrainian psychologists	10 (27.8%)	50 (28.2%)	32 (23.0%)	13 (22.0%)	4 (8.2%)
Group counselling	2 (5.6%)	47 (26.6%)	33 (23.7%)	12 (20.3%)	15 (30.6%)
Online self-help resources	10 (27.8%)	39 (22.0%)	30 (21.6%)	12 (20.3%)	7 (14.3%)
Support groups	7 (19.4%)	26 (14.7%)	28 (20.1%)	16 (27.1%)	8 (16.3%)
Family counselling	11 (30.6%)	24 (13.6%)	17 (12.2%)	6 (10.2%)	9 (18.4%)
Telephone hotlines	0 (0.0%)	15 (8.5%)	12 (8.6%)	7 (11.9%)	5 (10.2%)

Individual counselling	242 (52.6%)
Online help from Ukrainian psychologists	109 (23.7%)
Group counselling	109 (23.7%)
Online self-help resources	98 (21.3%)
Support groups	85 (18.5%)
Family counselling	67 (14.6%)
Telephone hotlines	39 (8.5%)

Multiple-choice question, % do not sum up to 100%.

Individual counselling: Across all age groups, individual counselling was the most commonly attended activity, particularly in the 40-49 (58.3%) and 60+ (57.1%) age groups. This suggests a notable demand for one-on-one therapeutic support among middle-aged refugees.

Group counselling: Group counselling was the least frequently attended by the youngest cohort - 5.6% (2), in comparison to 23.3% average among

other age groups. This might indicate a strong preference for individual sessions or other forms of psychosocial support among the youngest group.

Support groups: The 50-59 age group showed the highest participation in support groups at 27.1%. Support groups offer mutual understanding and shared experiences, which may be especially beneficial for older adults.

Family counselling: Interestingly, family counselling had higher attendance among younger participants, with the 18-29 age group reporting 30.6% attendance. This might reflect the pressures and challenges younger families face during displacement.

Online self-help resources: Online resources were accessed across all age groups, with the 18-29 age group leading at 27.8%. The digital approach suggests that refugees are seeking out digital platforms to manage their psychosocial well-being. At the same time, only 14.3% of the oldest cohort respondents accessing those resources might indicate a certain level of digital exclusion of the older members of the community.

Telephone hotlines: While not as commonly used as other resources, telephone hotlines had some usage among all groups but the youngest (average of 8.5%). This may indicate a limited need for immediate, accessible support for this demographic.

Online help from Ukrainian psychologists: The 20-29 and 30-39 age group reported the highest attendance for online sessions with Ukrainian psychologists at 28.2% and 27.8%, respectively. This suggests a preference for culturally familiar therapeutic interactions. Again, the lowest usage of online resources among the oldest age group might indicate limited accessibility to the digital services.

IMPACT OF PSYCHOLOGICAL SUPPORT

If a person has sought any form of psychological support in the country they are residing.

“Was the support you received helpful?”

While individual counselling is commonly sought across all age groups, other resources like group counselling, online platforms, and telephone hotlines cater to specific age demographics. As refugees navigate the challenges of displacement, these findings emphasise the importance of offering a variety of psychosocial support options tailored to different age groups and preferences.

The data reflects a generally positive sentiment towards the psychological support received, with a vast majority perceiving it as beneficial. However, there’s also an acknowledgment that not all interventions were universally effective, and there’s room for improvement or diversification in the methods and approaches used to provide psychological assistance.

Positive reception: Combining both “Very Helpful” and “Somewhat Helpful” categories, it’s evident that the majority (70.3%) of respondents who sought psychological assistance found it beneficial. This underscores the importance

of such services and their potential to make a positive impact on individuals undergoing stress or trauma.

Ambiguous reception: A notable 24.0% (110 respondents) were uncertain about the efficacy of the psychological support, as they labelled their experience as “Neutral” or said they “Can’t tell” if it was helpful. This might be due to various reasons such as:

- Their individual process of healing taking a longer time, and thus, it being too early to judge the effectiveness.

- The possibility that the specific method of assistance wasn't well-suited to their needs.
- Personal factors inhibiting them from fully gauging the benefit at the time of the survey.

minority (5.7% combined from both negative categories), the psychological assistance did not meet their expectations or needs. This highlights the importance of diverse and tailored approaches in psychological support to cater to varying individual needs.

Negative reception: While the majority found the support beneficial, it's evident that for a small

REASONS FOR NOT SEEKING PSYCHOLOGICAL SUPPORT

If a person has not sought any form of psychological support in the country they are residing.

"What have been the primary reasons for not seeking psychological help?"

Some barriers, like language and affordability, persist across age groups but might have different underlying reasons. Younger groups might face these barriers due to transitional life phases, while older groups might encounter them due to fixed incomes or relying on social support. Factors such as beliefs about the necessity of psychological help, fear of stigma, self-reliance, and scepticism about treatment efficacy might all hint at deep-rooted cultural influences. While these factors are present across all age groups, some generational differences are visible, especially in terms of the negative perception and stigma.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
Language barriers / unable to communicate	44 (34.4%)	98 (26.7%)	84 (29.4%)	29 (20.9%)	41 (25.3%)
Unable to afford fees for services	44 (34.4%)	92 (25.1%)	62 (21.7%)	30 (21.6%)	34 (21.0%)
Limited time availability	35 (27.3%)	90 (24.5%)	77 (26.9%)	21 (15.1%)	13 (8.0%)
I don't know where to seek psychological support	32 (25.0%)	68 (18.5%)	56 (19.6%)	26 (18.7%)	27 (16.7%)
Managing mental health issues independently/on my own	20 (15.6%)	46 (12.5%)	54 (18.9%)	26 (18.7%)	27 (16.7%)
Believe that psychological help is unnecessary	22 (17.2%)	45 (12.3%)	39 (13.6%)	24 (17.3%)	25 (15.4%)
Unable to take time off from work or childcare	17 (13.3%)	57 (15.5%)	41 (14.3%)	9 (6.5%)	4 (2.5%)
Chose to wait and see if the problem improved on its own	19 (14.8%)	44 (12.0%)	44 (15.4%)	10 (7.2%)	10 (6.2%)
Skepticism about the effectiveness of psychological support	12 (9.4%)	21 (5.7%)	29 (10.1%)	9 (6.5%)	15 (9.3%)
Lack of trust in local providers	11 (8.6%)	30 (8.2%)	25 (8.7%)	8 (5.8%)	7 (4.3%)
Other	13 (10.2%)	20 (5.4%)	21 (7.3%)	15 (10.8%)	11 (6.8%)
Distance to provider or expensive transport	9 (7.0%)	26 (7.1%)	13 (4.5%)	8 (5.8%)	12 (7.4%)
Plan to seek psychological help in the future	12 (9.4%)	22 (6.0%)	14 (4.9%)	6 (4.3%)	6 (3.7%)
Uncertainty about how to identify a reputable and trusted psychologist	11 (8.6%)	17 (4.6%)	13 (4.5%)	5 (3.6%)	0 (0.0%)
Limited availability or accessibility of services	7 (5.5%)	15 (4.1%)	11 (3.8%)	8 (5.8%)	5 (3.1%)
Fear of negative perceptions or judgments from others	14 (10.9%)	13 (3.5%)	11 (3.8%)	3 (2.2%)	1 (0.6%)
Safety and insecurity concerns	14 (10.9%)	17 (4.6%)	6 (2.1%)	2 (1.4%)	2 (1.2%)
Long wait times for services	5 (3.9%)	9 (2.5%)	16 (5.6%)	4 (2.9%)	7 (4.3%)
Desired treatment, medication, or service is not available	2 (1.6%)	3 (0.8%)	7 (2.4%)	4 (2.9%)	13 (8.0%)

Multiple-choice question, % do not sum up to 100%.

Language barriers/unable to communicate:

The most frequently cited reason for not seeking psychological help is the language barrier or an inability to communicate. This underscores the challenges refugees face in a new environment, especially when accessing healthcare/mental health services that require clear communication.

Unable to afford fees for services: The inability to afford fees for services emerges as the second most prominent barrier, highlighting the financial challenges faced by refugees, and perhaps a deprivatisation of accessing mental health services in order to afford covering basic needs.

Limited time availability: People in the age groups 18-29, 30-39 and 40-49 more often cite limited time availability as a significant reason for not accessing psychological support. This may indicate that these age groups, often associated with time dedicated to education or peak working years, find it challenging to allocate time for psychological support.

Lack of knowledge on where to seek support: Many respondents weren't sure where to go for psychological support, indicating a possible lack of information or accessible resources. Interestingly, this issue was reported most frequently by the youngest cohort (25.0% compared to 16.4% on average across other age groups).

Cultural background can play a significant role in shaping attitudes and behaviours related to mental health and seeking psychological support.

Factors rooted in cultural beliefs, practices, and values can influence how individuals perceive mental health, stigma associated with seeking help, and the overall willingness to access psychological services.

- **Managing mental health issues independently:** This could be influenced by cultural values emphasising resilience, self-reliance, or handling problems within the family or community rather than seeking external help. This reason was mentioned by 16.0% of respondents.
- **Belief that psychological help is unnecessary:** This could reflect cultural beliefs about mental health, where psychological distress might be normalised or not recognized as requiring professional intervention. Reported by 14.3% of respondents.
- **Scepticism about the effectiveness of psychological support:** Cultural beliefs about healing, well-being, and the role of formal psychological support might influence this perspective. Mentioned by 7.9% of the respondents.
- **Fear of negative perceptions or judgments from others:** This might indicate cultural stigma associated with mental health challenges and seeking help. Interestingly, this issue seems to be the most prevalent among the 18-29 age group (10.9% compared to 2.5% on average across other age groups).

RECOMMENDATIONS:

- **Youth engagement:** Since the 18-29 age group exhibits higher concerns about negative perceptions, it is recommended to specifically target youth through awareness campaigns, workshops, or peer-led initiatives to combat stigma.
- **Educational campaign:** Campaigns emphasising the benefits and effectiveness of psychological support can be considered. These could include sharing success stories and testimonials from individuals who have benefited from psychological support. Use of social media would be recommended to reach the youngest cohort.
- **Engagement of influential individuals:** Collaboration with influential figures or leaders within the refugee community to promote positive perceptions of psychological support.
- **Awareness on available support:** It is recommended to conduct community outreach to inform refugees about available financial assistance or programs that offer free psychological support. At the same time, already established centres or kiosks in community hubs should provide refugees with information about available psychological support services.
- **Multilingual and flexible-hours service:** Ukrainians should be able to access psychological support services in their native language/s. Additionally, offering psychological services during non-traditional hours, such as evenings or weekends, could accommodate working individuals or students.

Olha and Ihor outside their home, in Cherepyn village, Lviv region. The Red Cross is helping doctors and nurses reach hard-to-reach communities in Ukraine through mobile health units. These teams travel to remote villages in Ukraine to provide medical services to people, including those who have been displaced by the conflict. The Red Cross provides vehicles and medication to support the mobile health units, helping them reach individuals who otherwise wouldn't be able to access regular healthcare.

Photo: Alina Smutko/British Red Cross



RECOGNITION OF SERVICE PROVIDERS

KNOWLEDGE OF ORGANISATIONS PROVIDING PSYCHOLOGICAL SUPPORT FOR DISPLACED PEOPLE FROM UKRAINE

“Do you know of any organisations or initiatives that provide psychological support specifically for displaced people from Ukraine in your host country?”

A significant portion, around 42%, of respondents, whether residing in Ukraine or not, are not familiar with organisations providing psychological support for displaced people from Ukraine in their host countries. This might point to a potential gap in communication and outreach by such organisations, or a lack of such organisations in certain regions altogether.

Awareness among all respondents:

- Aware: 34.2% (546 respondents).
- Unaware: 41.7% (667 respondents).
- Uncertain: 24.0% (384 respondents).

Awareness among non-residents of Ukraine:

- Aware: 33.2% (420 respondents).
- Unaware: 42.3% (535 respondents).
- Uncertain: 24.5% (310 respondents).

KNOWLEDGE OF ORGANISATIONS PROVIDING ACTIVITIES (E.G., PEER SUPPORT GROUPS, CREATIVE ACTIVITIES, ETC.) FOR DISPLACED PEOPLE FROM UKRAINE

“Do you know of any organisations or initiatives that provide activities such as peer support groups, creative or sports activities, and awareness sessions on stress and coping specifically for displaced people from Ukraine in your host country?”

Even more so than with psychological support, almost half of the respondents, irrespective of whether they reside in Ukraine or not, are not familiar with organisations providing activities such as peer support groups and creative activities for Ukrainian refugees. This suggests that there might be an even greater need for improving outreach or increasing the establishment of such organisations/initiatives.

Awareness among all respondents:

- Aware: 28.1% (448 respondents).
- Unaware: 48.9% (781 respondents).
- Uncertain: 23.0% (368 respondents).

Awareness among non-residents of Ukraine:

- Aware: 28.9% (365 respondents).
- Unaware: 49.0% (620 respondents).
- Uncertain: 22.1% (280 respondents).

ISSUES IDENTIFIED:

Awareness gap: The data shows that a considerable number of respondents (around 42% to 49%, depending on the type of service) are unaware of organisations providing psychological support or activities for well-being. This substantial percentage of unawareness points to a significant gap in either the availability of these services or the communication about them.

Communication challenges: Given that a sizable 22% to 24.5% of respondents are unsure of the existence of such organisations, it implies there might be communication challenges even when these organisations exist. The “I’m not sure” category indicates that while some individuals might have heard about such organisations, they are not confident in the services provided or their availability.

Consistent findings across all respondents: The consistency in findings between all respondents and non-residents of Ukraine suggests that this lack of awareness is not just limited to those still in Ukraine. This consistency further emphasises the need for improvements in outreach strategies.

RECOMMENDATIONS:

- **Enhance outreach programs:** Organisations that provide psychological support and well-being activities for displaced people from Ukraine should consider enhancing their outreach programs. This can be done by leveraging local community networks, collaborating with other NGOs, or partnering with local governments.
- **Utilise multiple communication channels:** Organisations should diversify their communication methods. Using multiple channels, such as local media, social media, community centres, and even religious institutions, can help in reaching a broader audience. Conducting a brief survey about information needs and preferred and reliable information channels could help adjust dissemination strategies.
- **Clarity in communication:** It’s vital that organisations provide clear and consistent information about their services. This can help reduce the uncertainty among people who could benefit from accessing psychological support.
- **Evaluate service locations:** Given the significant lack of awareness, organisations and stakeholders might want to evaluate if the services are being provided in regions with the highest concentration of Ukrainian refugees.
- **Establish more peer support and activity-based initiatives:** As there is even less awareness of organisations providing peer support groups and creative activities than there is of organisations offering psychological support, this may indicate that more of these need to be established. Such initiatives can play a crucial role in helping refugees cope and integrate into their new communities.

PERSONAL PREFERENCES

PARTICIPATION IN ACTIVITIES

“Since the crisis started, have you attended any of these activities?”

The survey highlights diverse support and service needs among Ukrainian refugees. Young adults seem to rely less on formalised support structures, whereas older age groups are more likely to engage in stress management and relaxation activities. However, across all age groups, there’s a notable percentage that did not access any of the provided supports, emphasising the need for more inclusive and accessible support mechanisms tailored to individual needs.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
None	114 (68.3%)	262 (48.0%)	222 (52.4%)	117 (59.1%)	113 (55.4%)
Organised leisure activities for children and adults	29 (17.4%)	196 (35.9%)	116 (27.4%)	29 (14.6%)	32 (15.7%)
Organised creative activities/events	21 (12.6%)	118 (21.6%)	89 (21.0%)	28 (14.1%)	45 (22.1%)
Counselling on psychological problems by social workers or trained volunteers	13 (7.8%)	61 (11.2%)	61 (14.4%)	24 (12.1%)	25 (12.3%)
Organised sports activities/events	18 (10.8%)	53 (9.7%)	40 (9.4%)	12 (6.1%)	7 (3.4%)
Organised activities that promote relaxation and stress reduction	8 (4.8%)	39 (7.1%)	35 (8.3%)	23 (11.6%)	19 (9.3%)
Organised lectures and classes on stress management	5 (3.0%)	31 (5.7%)	25 (5.9%)	13 (6.6%)	16 (7.8%)

Multiple-choice question, % do not sum up to 100%.

No support accessed: A significant number of respondents indicated that they did not access any support or services. This was highest among the 18-29 age group at 68.3%. However, even in the older age groups, about half of the respondents (52% on average) said they had not accessed any listed support or services.

Unable to afford fees for services: Counselling on psychological problems by social workers or trained volunteers was accessed by a varying percentage across age groups. Young adults (18-29) reported a 7.8% usage rate, while it was somewhat higher for those in older age groups at 12.5% on average.

Sport activities: Organised sports activities/events were accessed by about 10.8% of the 18-29 age group. This interest slightly decreases with

age, with only 3.4% of those 60+ participating in such activities, likely due to health conditions and decreased physical mobility more prevalent among this age group, or lack of an age-appropriate offer.

Creative activities: Creative activities/events witnessed a consistent interest across age groups. Surprisingly, both the 30-39, 40-49 and 60+ age groups showed around a 20% participation rate, highlighting an almost universal appeal of creative outlets.

Stress management classes: Lectures and classes on stress management were accessed more by the older age groups, with 6.6% in the 50-59 group and 7.8% in the 60+ group. Only 3% of the 18-29 age group representatives participated in such activities.

Leisure activities: Organised leisure activities for children and adults were most popular among the 30-39 age group, with a significant 35.9% participation rate. This interest decreases with age, dropping to 14.6% for the 50-59 age group and to 15.7% for the 60+ cohort.

Relaxation activities: Activities promoting relaxation and stress reduction were accessed more by the older age groups. Those aged 50-59 showed an 11.6% participation rate, while only 4.8% of participants aged 18-29 mentioned having been engaged in these activities.

RECOMMENDATIONS:

- **Enhance accessibility and awareness of counselling services:** Given that counselling for psychological problems showed varying usage rates across age groups, there's a need to enhance the accessibility and awareness of these services. This could be done by increasing the number of available counsellors, offering sessions in multiple languages, teaming up with other organisations and service providers, and launching awareness campaigns highlighting the benefits of counselling.
- **Implement targeted stress management programs:** Given the increased interest in stress management classes among older age groups, it would be beneficial to implement programs specifically tailored to address the unique challenges faced by this demographic. This might include sessions on coping with loss, displacement, or health-related stressors - both online and offline.
- **Broaden the scope of creative and leisure activities:** With both young and older age groups showing interest in creative activities, it's evident that these outlets offer universal appeal. It is recommended to broaden the range and frequency of creative workshops, art therapy sessions, and leisure activities to cater to diverse interests and talents. Conducting a brief survey about the type of activities that the community prefers could help when planning these types of activities.
- **Foster community engagement through sports:** Sports activities were accessed mainly by the younger age groups. By promoting community sports events or tournaments, organisations can foster community engagement, promote physical health, and provide a sense of normalcy and routine. Including members of host communities in these activities can support integration and cultural awareness efforts.



MHPSS key messages created under the EU4Health Project

REASONS FOR NOT PARTICIPATING IN ORGANISED ACTIVITIES

“What were the main reasons for not attending any of the activities?”

While some barriers, like lack of awareness and time constraints, are universal, others, such as language barriers and age suitability concerns, are more age-specific.

Lack of awareness: A notable portion of the younger respondents, specifically 46.3% of those aged 18-29, reported being unaware of any organised social activities. This indicates a potential communication gap in reaching this demographic.

Time constraints: Limited time availability was a reason across all age groups, with percentages ranging from 10.8% in the 60+ group to 33.9% in the 30-39 age group.

Language barriers: Language barrier was cited across all age groups, with an average of 28.1% facing this barrier. This suggests a need for multilingual services or resources targeting this age bracket.

Location and cost issues: Concerns about the location being too far or transportation being too expensive were shared across age groups. Interestingly, the 50-59 age group expressed this concern the most at 12.2%.

Interest and age suitability: A lack of interest in the offered activities was prominent among the younger age groups, reaching 13.9% for those aged 18-29. Additionally, some respondents, particularly in the 60+ age group (10.8%), felt that activities were not tailored to their age group or demographic. Similarly, the 60+ age group most

often justified the lack of participation with health issues or physical limitations (25.2%).

Safety and insecurity: Safety concerns were relatively low across all age groups, indicating that Ukrainians joining organised activities overall feel safe and comfortable.

Other commitments: Other commitments or responsibilities, such as work or family, were a prominent reason across all age groups. The 50-59 age group had the highest percentage at 26.1% followed by representatives of the youngest group at 23.1%.

Childcare needs: The need for childcare during activity times was more pronounced in the younger age groups, with 11.1% of the 18-29 age group and 14.4% of the 30-39 age group citing this as a reason.

Sense of belonging: A lack of a sense of belonging or inclusivity was not a widespread concern, but it did reach 7% for the 50-59 age group.

A range of other unspecified reasons were given across all age groups.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
I don't know about any organised social activities	50 (46.3%)	106 (41.2%)	81 (36.8%)	33 (28.7%)	37 (33.3%)
Limited time availability	32 (29.6%)	87 (33.9%)	73 (33.2%)	24 (20.9%)	12 (10.8%)
Language barriers / unable to communicate	21 (19.4%)	53 (20.6%)	52 (23.6%)	27 (23.5%)	24 (21.6%)
Have other commitments or responsibilities (e.g., work, family)	25 (23.1%)	56 (21.8%)	49 (22.3%)	30 (26.1%)	15 (13.5%)
Prefer to spend time alone or in smaller groups	23 (21.3%)	30 (11.7%)	23 (10.5%)	19 (16.5%)	10 (9.0%)
Location of activities is too far or transport is too expensive	8 (7.4%)	28 (10.9%)	20 (9.1%)	14 (12.2%)	8 (7.2%)
Other	6 (5.6%)	18 (7.0%)	26 (11.8%)	12 (10.4%)	13 (11.7%)
Lack of childcare options during activity times	12 (11.1%)	37 (14.4%)	16 (7.3%)	2 (1.7%)	0 (0.0%)
I'm not interested in the activities offered	15 (13.9%)	18 (7.0%)	14 (6.4%)	5 (4.3%)	14 (12.6%)
Feel uncomfortable in social situations or have social anxiety	12 (11.1%)	30 (11.7%)	16 (7.3%)	4 (3.5%)	2 (1.8%)
Activities are held at inconvenient times	11 (10.2%)	26 (10.1%)	17 (7.7%)	4 (3.5%)	5 (4.5%)
Health issues or physical limitations prevent participation	2 (1.9%)	6 (2.3%)	10 (4.5%)	8 (7.0%)	28 (25.2%)
Safety and insecurity concerns	8 (7.4%)	9 (3.5%)	10 (4.5%)	4 (3.5%)	5 (4.5%)
Do not feel a sense of belonging or inclusivity in the activities	6 (5.6%)	11 (4.3%)	9 (4.1%)	8 (7.0%)	2 (1.8%)
Participating in activities is too expensive	8 (7.4%)	5 (1.9%)	12 (5.5%)	1 (0.9%)	6 (5.4%)
Prefer other types of activities not currently offered	7 (6.5%)	9 (3.5%)	6 (2.7%)	4 (3.5%)	4 (3.6%)
Fear of being judged or negatively perceived by others if I participate in s..	5 (4.6%)	13 (5.1%)	4 (1.8%)	3 (2.6%)	1 (0.9%)
The activities are not for my age group or demographic	2 (1.9%)	1 (0.4%)	2 (0.9%)	5 (4.3%)	12 (10.8%)

Multiple-choice question, % do not sum up to 100%.

RECOMMENDATIONS:

- **Enhance awareness and outreach:** Given that a significant percentage of the younger age group (46.3% of those aged 18-29) reported not knowing about any organised social activities, there's a need for improved communication and outreach. Organisations should increase visibility through community channels, local media, and social platforms to ensure that refugees are aware of available activities. Conducting a brief survey about information needs and preferred and reliable information channels could help adjust dissemination strategies.
- **Address logistical barriers:** Several respondents cited logistical issues, such as location being too far or transportation being too expensive, as reasons for non-participation. The older group also mentioned their health condition and limited mobility

being the reasons for not being able to participate in activities. To address this, the following can be considered:

- Providing transportation options or shuttle services.
- Organising activities in various locations to cater to different communities' needs (including needs of people with disabilities and older people).
- Offering virtual sessions or online resources for those unable to attend in person.
- **Offer diverse activities:** The lack of interest in offered activities and a preference for other types not currently available were noted as reasons for non-participation. Conducting periodic feedback sessions or surveys can help organisations understand and cater to the evolving interests and needs of the displaced population.

- **Enhance inclusivity and belonging:** Some respondents felt a lack of belonging or inclusivity in the activities, while others felt the activities weren't tailored for their age group or demographic. It is recommended to prioritise creating an inclusive environment where all participants feel welcome. This could involve:
 - Conduct a brief assessment to identify preferred activities.
 - Based on the assessment offering activities tailored for different age groups.
 - Training facilitators on cultural sensitivity and inclusivity.
 - Encouraging community-led initiatives
- where refugees can take a leadership role.
- Include host communities to support integration efforts.
- **Address language and communication barriers:** Language barriers were highlighted as a concern by all cohorts. Offering translation services, multilingual resources, or language-specific sessions can help bridge this gap and ensure all refugees can access and benefit from the support services and activities.

PREFERRED ORGANISED ACTIVITIES

“What were the main reasons for not attending any of the activities?”

Organised leisure activities, especially those for children and adults, are highly sought after - mentioned by 46.4% respondents), closely followed by creative events (40.4%), and organised activities promoting relaxation and stress reduction (37.5%). While over a quarter of respondents see the value in counselling, it's notable that nearly 21% of respondents aren't interested in any of the listed activities. This could be due to various reasons, including the barriers set out in the previous section.

Organised leisure activities for children and adults: The 30-39 and 40-49 age groups show the highest interest in organised leisure activities for children and adults, with more than half of the respondents in these age brackets expressing interest. This could be indicative of these age groups potentially having young children and seeking activities that cater to both adults and children.

Organised creative activities/events: The 30-39 age group demonstrates the highest interest in this category (43.6% of the age group) but this preference was reported with similar frequency

across other cohorts, with an average of 38.6% of other respondents mentioning it.

Activities promoting relaxation and stress reduction: Similarly, the 30-39-age demographic shows the highest preference (38.4%, compared to the similar general average of 36.6%).

Counselling by social workers or trained volunteers: The oldest group (60+) was the least interested in this type of activity - only 19% of respondents in this age group identified this as their preference, whereas the average among other groups was 29%.

Organised sports activities/events: The preference for such activities decreases with age - this might be affected by mobility issues and general health problems more often reported by older people. 33.7% of the youngest group would like to participate in sport activities/events, while among the oldest participants it is only 11.7%.

Organised lectures and classes on stress management: Similarly, these activities seem to be the most preferred among the youngest

respondents (24.1% of the age group) and the least among the oldest cohort (17.6%).

No interest in any activities: Both the youngest (18-29) and older (50-59 and 60+) age groups have a higher percentage of respondents indicating no interest in the listed activities (28.9%, 29.5%, 27.1%, respectively) compared to the 30-39 (15.8%) and 40-49 (17%) age groups.

	Age - groups				
	18-29	30-39	40-49	50-59	60+
Organised leisure activities for children and adults	60 (36.1%)	311 (56.4%)	232 (54.8%)	52 (26.9%)	59 (28.8%)
Organised creative activities/events	62 (37.3%)	240 (43.6%)	175 (41.4%)	68 (35.2%)	76 (37.1%)
Organised activities that promote relaxation and stress reduction	55 (33.1%)	215 (39.0%)	160 (37.8%)	72 (37.3%)	74 (36.1%)
Counselling on psychological problems by social workers or trained volun..	51 (30.7%)	168 (30.5%)	114 (27.0%)	54 (28.0%)	39 (19.0%)
Organised sports activities/events	56 (33.7%)	149 (27.0%)	119 (28.1%)	24 (12.4%)	24 (11.7%)
No, I'm not interested in any of these.	48 (28.9%)	87 (15.8%)	72 (17.0%)	57 (29.5%)	56 (27.3%)
Organised lectures and classes on stress management	40 (24.1%)	105 (19.1%)	93 (22.0%)	40 (20.7%)	36 (17.6%)

Multiple-choice question, % do not sum up to 100%.

The 18-29 age group might prioritise personal or peer group activities over family-centric ones. They might be more inclined towards activities that are more individualistic or cater specifically to their age demographic, like sports, outings, or hobby classes. The 30-39 and 40-49 age groups are typically at a life stage where they might have young children. As a result, activities that cater to both children and adults could be appealing as they offer an opportunity for family bonding. These age groups might be looking for activities that are both child-friendly and enjoyable for adults. The older age groups (50-59 and 60+) might have fewer young children in their immediate family to participate in such activities with. Additionally, physical limitations or health concerns might deter them from certain leisure activities.

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