

REPORT ON THE ACTIVITIES OF THE WORKING GROUP FOR PROTECTION AND IMPROVEMENT OF MENTAL HEALTH OF REFUGEES, ASYLUM SEEKERS AND MIGRANTS

2019-2020



КОМЕСАРИЈАТ
ЗА ВОЗВРАТНЕ И МИГРАЦИЈЕ
РЕПУБЛИКЕ СРБИЈЕ



World Health
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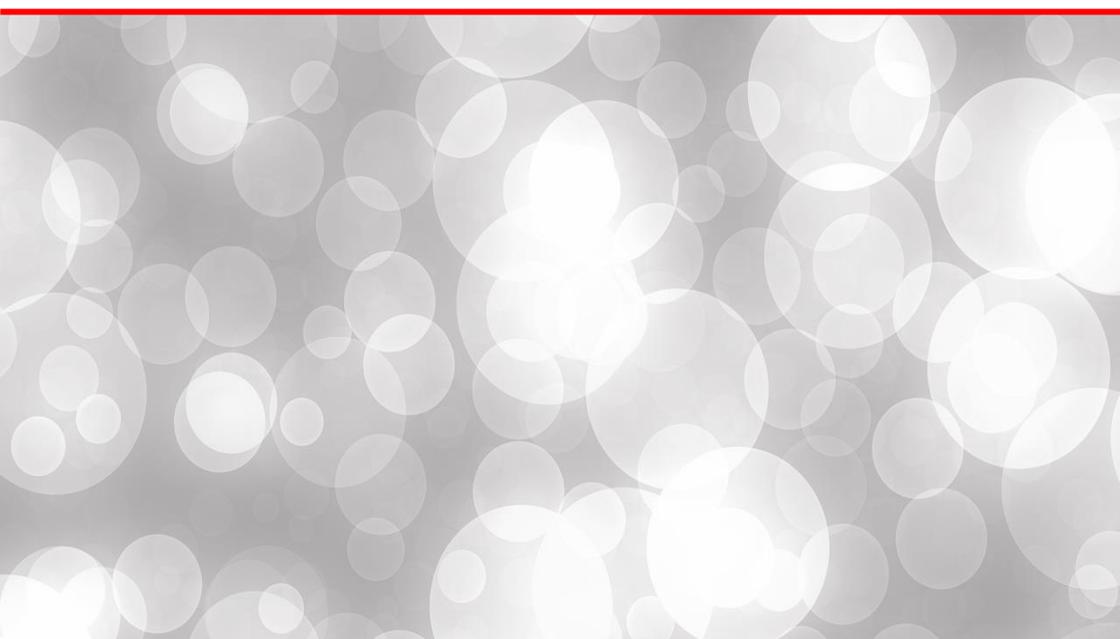
This publication was created with the support of the Open Society Foundation.



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The authors would like to thank the members of the Working Group, psychologists and healthcare professionals who provided mental health services, as well as other associates who contributed to the availability and quality of mental health services. We owe special thanks to Maria Caterina Gargano for her help in preparing this publication.

From the beginning of the refugee crisis in Serbia, provision of mental health services proved to be a challenge for the existing system. Year after year, studies have shown that almost 80% of refugees require some type of psychological support; however, the standards for these services - who, where, when and how to provide mental health care and support - were not sufficiently defined. There were additional challenges arising from the fact that a large number of actors participated in the provision of these services, that services were primarily financed through short-term projects, and that service providers were frequently replaced due to contextual changes. Therefore, it was recognized that coordination between different service providers was required in order to prevent overlap and ensure the continuity of the services, on one hand, and to facilitate a more equitable distribution of resources across different locations in Serbia, on the other.



In December 2018, experts from the Institute of Mental Health, Institute of Public Health, PIN (Psychosocial Innovation Network) and the Department of Psychology, Faculty of Philosophy, University of Belgrade with the support of World Health Organization, developed a strategic document entitled **Guidance for Protection and Improvement of the Mental Health of Refugees, Asylum Seekers and Migrants in Serbia** (hereafter: the Guidance), which set up standards for the provision of mental health services to refugees, migrants and asylum seekers in Serbia. This document was adopted by the Ministry of Health of the Republic of Serbia and the Commissariat for Refugees and Migration of the Republic of Serbia.

One of the most important recommendations from the Guidance referred to the creation of the **Working Group for Protection and Improvement of Mental Health of Refugees, Asylum Seekers and Migrants** (hereafter: the Working Group), a coordinating body whose objective was to improve systemic protection of the mental health of refugees, asylum seekers and migrants in Serbia (hereafter: the beneficiaries). At the request of the Commissariat for Refugees and Migration of the Republic of Serbia, the World Health Organization and PIN, and in collaboration with the Ministries of Health, Labour, Employment, Veteran and Social Policy, as well as relevant international agencies and non-governmental organizations, the Working Group for Protection and Improvement of Mental Health was formed and started with its activities by the middle of 2019. Since its inception, the Working Group has been engaged in solving current challenges related to the provision of mental health services at locations where refugees, asylum seekers and migrants are staying such as monitoring the implementation of standards for the provision of mental health services, improving the systemic response to problems in the field of mental health, strengthening multisectoral and multidisciplinary collaboration, and creating long-term and sustainable systemic solutions in the field.

This publication is a report on the activities of the Working Group, on challenges observed and results achieved, as well as on future plans for the improvement of systemic and sustainable protection of the mental health of refugees, asylum seekers and migrants in Serbia.

The activities of the Working Group, as well as the organization of additional mechanisms for the systemic protection of the mental health of refugees, asylum seekers and migrants are supported by a project carried out by PIN in collaboration with World Health Organization and the support of Open Society Foundation.

**SMERNICE ZA ZAŠTITU I UNAPREĐENJE
MENTALNOG ZDRAVLJA IZBEGLICA, TRAŽILACA
AZILA I MIGRANATA U REPUBLICI SRBIJI**

**GUIDANCE FOR PROTECTION AND IMPROVEMENT
OF THE MENTAL HEALTH OF REFUGEES, ASYLUM
SEEKERS AND MIGRANTS IN SERBIA**



WORKING GROUP FOR PROTECTION AND IMPROVEMENT OF MENTAL HEALTH OF REFUGEES, ASYLUM SEEKERS AND MIGRANTS

MANDATE AND GOALS

- Improving protection of the mental health of refugees, asylum seekers and migrants
- Monitoring implementation and reviewing defined standards on protection of the mental health of refugees, asylum seekers and migrants
- Recognizing and resolving current challenges in the field
- Identifying systemic challenges in terms of ensuring protection of mental health and finding sustainable systemic responses to recognized challenges
- Organizing existing and planning and coordinating newly-discovered resources and additional operating mechanisms to ensure the most efficient long-term protection of the mental health of refugees, asylum seekers and migrants
- Strengthening and promoting a multisectoral and multidisciplinary approach to the protection of mental health

MEMBERS AND MEETING FREQUENCY

The Working Group consists of representatives of state institutions, international agencies and non-governmental organizations engaged in work regarding mental health issues.

Members of the Working Group up to this day:



Besides the regular members, the Working Group may also invite other actors to join its meetings in order to more efficiently and effectively respond to and address recognized challenges and issues as they are encountered.

Since its formation, the Working Group initially met once every two months, but from October 2019 to present, it has been meeting once a month. So far, the Working Group has held 12 meetings.

Coordinating role of the Working Group

- **2016 - 2017** *Various actors provided mental health services at several locations which was mostly financed by projects - without a centralised system of coordination or a service map*
- **2018** *The Guidance defined the services and standards for the provision of services, which allowed for evaluation and mapping coverage at different locations by mental health services available*
- **2019** *The Working Group was formed with the aim of implementing the Guidance and monitoring standards in the provision of services*
Mental health services were mapped at different locations, evaluating the adequacy of coverage and identifying locations which are not adequately covered by services
- **2019 - 2020** *Transfers of psychologists from IOM and DRC to the Ministry of Health were monitored, and all newly-contracted psychologists were gathered in order to provide them with the necessary introductory and continuous training, supervision and support*
- **2020** *Psychologists from the NGO sector were reallocated to locations which were either not covered by human resources or required additional human resources*
Withdrawal of organizations and agencies that provide mental health services was monitored in order to ensure continuity of care for those using them, and that no location was left without access to services
- **2020 - 2021** *The Working Group will continue to monitor changes at different locations, assess needs, allocate existing and find new resources in order to ensure continuous and equal access to services at all locations*

Some of the matters the Working Group has been involved in since its formation include:

- Mapping the availability of preventive and protective mental health services for refugees, asylum seekers and migrants.
- Coordinating existing resources in order to improve availability and ensure continuity of services
- Strengthening the role of primary and secondary healthcare in the provision of mental health services by creating a map of institutions responsible at the primary, secondary and tertiary levels of healthcare, creating a directory of all institutions, defining paths for referral to primary, secondary and tertiary levels of healthcare and organizing meetings with competent institutions
- Introducing and defining monthly reports of all psychologists participating in the activities in order to disseminate timely information from all locations in Serbia and follow new challenges in terms of mental health protection
- Establishing systemic initial and in-depth mental health screenings
- Ensuring and promoting multidisciplinary and multisectoral mental health protection by improving cooperation between different sectors and disciplines, as well as between different service levels directed towards the protection of mental health of refugees, asylum seekers and migrants
- Strengthening and promoting systemic changes which should have preventive effects on mental health issues
- Recognizing and resolving current challenges in the field and improving the systemic response to the challenges that have been identified
- Ensuring timely and continuous psychological support and psychiatric care for the most vulnerable beneficiaries
- Coordinating mental health protection services during the Covid-19 pandemic and state of emergency

What happens when demand for care exceeds available resources?

We look for answers within the existing system

Example: A large number of beneficiaries of psychiatric care were identified in AC Krnjača. The resources available at the time were not sufficient to cover the costs of transportation, translation and proper escort for beneficiaries visiting community health centres for regular check-ups. The Working Group looked for alternative ways to provide services and, in cooperation with the Community Health Centre Palilula, set up a mechanism for monthly field visits of a psychiatrist to the asylum centre, in order to optimize the available resources, reduce workload and provide the best possible care and protection to the most vulnerable beneficiaries.

We look for solutions by providing additional services

Example: Due to the closest community health centre still being pretty far away, the lack of a child psychiatrist, and the Covid-19 pandemic, it was not possible to provide psychiatric treatment for minors staying in AC Bogovađa. At the request of the Working Group, UNHCR provided resources for the temporary provision of this service by contracting experienced experts for work with children and minors from the refugee population.

ADDITIONAL MECHANISM OF THE WORKING GROUP

I. EMERGENCY MEETINGS OF THE WORKING GROUP

In addition to regular monthly meetings and in order to improve the timeliness and efficiency of the response to unforeseen situations in the field and situations related to caring for highly vulnerable beneficiaries who require an immediate response, the Working Group developed an additional operating mechanism - emergency meetings of Working Group members. When necessary, emergency meetings are convened by members of the Working Group and attended only by actors who are important for the resolution of a specific issue.

Main objectives and topics of emergency meetings:

- Resolving emergency and urgent situations in the field that deviate from the defined procedure for provision of regular care to psychologically vulnerable beneficiaries
- Urgent care for the most vulnerable beneficiaries – beneficiaries in an acutely vulnerable psychological state, as well as beneficiaries with identified suicidal thoughts and tendencies
- Resolving issues related to urgent hospitalization and adequate post-hospital accommodation for the most psychologically vulnerable beneficiaries

Example: Significant difficulties were observed regarding urgent admission and hospitalization of beneficiaries. Lack of appropriate accommodation for psychologically vulnerable persons has also been observed in cases where neither staying in a collective accommodation nor hospitalization is recommended. This problem is most commonly seen in cases involving unaccompanied minors.

During the state of emergency caused by the Covid-19 pandemic, an unaccompanied minor with psychological difficulties who was experiencing an acute agitation episode was denied admission to two psychiatric institutions working with adolescents. At the same time, the minor could not be returned to their previous accommodation, because it did not have a mechanism in place to protect other children from the agitated individual. Because of this situation, the Ombudsman Office initiated a procedure in order to determine appropriate actions that healthcare institutions should take when providing care to this individual. The procedure showed that there are problems in communication and cooperation between the institutions which are responsible for providing care to older minors, which creates challenges and difficulties when they have to be urgently admitted to a hospital. These circumstances call into question the provision of adequate care to one of the most vulnerable groups.

The Working Group has started an initiative to generate a systemic solution of this issue, which focuses on improving cooperation with psychiatric institutions

2. ADDITIONAL THEMATIC MEETINGS

Additionally, in order to improve multisectoral and multidisciplinary cooperation and the comprehensive approach to mental health protection, the Working Group previously started many initiatives aiming to improve the availability and efficiency of services and support resources, which are either directly or indirectly related to the mental health of refugees, asylum seekers and migrants.

The main objectives and topics of the additional meetings were:

- Improving local coordination and collaboration regarding the provision of mental health protection services
- Improving and encouraging the use of community-based services
- Defining instruments for initial mental screening of refugees, asylum seekers and migrants
- Creating connections between and improving collaboration between all psychologists working in the refugee context
- Advocating for a more prominent role of psychologists in the protection of refugees' mental health
- Finding alternative ways to provide psychological and psychiatric support services at locations where this type of service is not available within the system
- Organizing field visits of psychiatrists from primary healthcare institutions to accommodation facilities to ensure greater accessibility and efficiency of psychiatric treatment
- Providing and advocating for the financing of specialized welfare services to vulnerable beneficiaries in order to ensure availability of such services to refugees, asylum seekers and migrants in Serbia
- Cooperating with the Ombudsman office on matters that are relevant for ensuring protection of the most vulnerable beneficiaries
- Obtaining guidelines from the Institute of Public Health regarding the implementation of measures for the prevention and containment of Covid-19, which are adjusted to psychologically vulnerable and traumatised beneficiaries, primarily to unaccompanied children

Participants and meeting frequency:

So far, 6 emergency meetings for provision of care to beneficiaries with psychological difficulties were held and more than 10 initiatives directed at multisectoral and multidisciplinary collaboration were implemented. Below is the list of participants:

- Commissariat for Refugees and Migration of the Republic of Serbia
- Ministry of Health of the Republic of Serbia
- Ministry of Labour, Employment, Veteran and Social Policy of the Republic of Serbia
- Ministry of Interior of the Republic of Serbia
- Ombudsman's Office
- Institute of Public Health of the Republic of Serbia "Dr. Milan Jovanović Batut"
- Primary, secondary and tertiary healthcare institutions (e.g. Community Health Centre (hereinafter CHC)) Vranje, CHC Palilula, Clinical Centre of Vojvodina, Institute of Mental Health, Clinic for Psychiatric Disorders "Dr Laza Lazarević", Psychiatric Clinic in the Clinical Centre of Niš, Clinic for Neurology and Psychiatry for Children and Youth)
- Asylum and reception centres (e.g. AC Sjenica, AC Krnjača, PC Vranje, AC Bogovađa)
- Welfare institutions, including accommodation facilities for minors (e.g. Institute for Education of Children and Youth in Belgrade and Niš, JRS)
- Social work centres (e.g. City Centre for Social Work Belgrade, CSW Sjenica, CSW Voždovac, CSW Vranje)
- Local governments (e.g. Persons responsible for social protection services, such as day care)
- International agencies (UNHCR, IOM, WHO, MSF, Caritas, DRC)
- Non-governmental organizations (PIN, MSF, IAN, Ideas, Indigo, HCIT).

When emergency care was provided to a child with multiple psychosocial difficulties who had no adequate professional support available in their accommodation facility, the Working Group collaborated with the healthcare and welfare systems and, in particular with the developmental counselling office in CHC Vranje and the Day Care for Children and Youth with Developmental Difficulties to help the child get access to the services in the community. As a result, the child was admitted to the Day Care. Additionally, clearly defined roles were assigned to different actors who participated in the provision of continuous support to the child and their family by a psychologist from the community health centre, a psychologist from an NGO, social workers working in the field and employees of the Children's Corner. Shortly afterwards, a child with similar difficulties was identified at AC Krnjača and the experience gained from the case in PC Vranje was foundational for the plan for providing care to this child in Belgrade.

Since an increasing need for specialized social protection services was recognized, the Working Group will put a special emphasis on this subject over the following period and will advocate for greater availability of specialized social protection services to refugees and asylum seekers in Serbia.

***From isolated cases to creating
practices and new mechanisms
in the system***

FUTURE PLANS

The Working Group will continue its work using the same dynamic and structure as before. Subjects on which the Working Group will focus on in the upcoming period are:

- Furthering activities focused on the improvement of systemic mental health protection
- Recognizing and resolving current challenges in the field
- Organizing available resources and planning and coordinating newly-available ones to ensure continuity of mental health services
- Recognizing the risks and negative effects associated with the Covid-19 pandemic on the mental health of refugees, asylum seekers and migrants and providing timely mental health protection
- Providing preventive programs and interventions with a particular focus on the subjects of self-harm and substance abuse among members of the refugee and migrant population
- Strengthening the role of primary and secondary healthcare in the provision of mental health services
- Improving the use of services in the community
- Advocating for access to specialized welfare services for refugees, asylum seekers and migrants
- Establishing systemic initial and in-depth mental health screenings
- Improving the protocol for urgent hospitalization of beneficiaries with psychological difficulties when necessary and finding and ensuring adequate post-hospital accommodation for the beneficiaries, who are not recommended to stay in collective centers

- Promoting and supporting evidence-based practices
- Strengthening and promoting systemic changes that are aimed at preventing mental health related issues.

*Substance abuse among refugees has been identified as a major problem by representatives of the Commissariat for Refugees, medical teams and social workers, as well as in the monthly reports of psychologists. Studies (PIN, 2020) further confirmed this, as 16.2% participants reported excessive **alcohol** consumption, while 12,7% reported using **psychoactive substances**. Therefore, the Working Group focused on designing a program and finding resources to prevent and combat this problem. The initiative resulted in a project that will be implemented by the Institute of Mental Health, with the support of UNICEF and in collaboration with members of the Working Group, and will aim to combat substance abuse in the refugee population in Serbia.*

Additionally, representatives of the Commissariat and medical teams have also highlighted the issue of self-harm among refugees, which was later documented in studies carried out during 2019 and 2020 (PIN, 2019; PIN, 2020). More than one quarter of respondents reported that they had been thinking about self-harm or had previously harmed themselves. Further, based on mechanisms established by the Working Group, all actors involved recognized this problem among beneficiaries and particularly among unaccompanied minors. The Working Group is currently preparing a response to these issues, which includes strengthening psychologists for work with this type of problem, recommending interventions that could be systematically implemented and finding additional resources for the implementation of preventive programs directed towards combating self-harm in the refugee population in Serbia.

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