

Mental Health and Psychosocial Support Regional Indicators Guidance Ukraine RRRP 2025-2026

Mandatory Regional MHPSS Indicators

For the 2025-2026 RRRP there will be a single regional indicator which aims to simplify reporting and address the complexities of reporting across sectors. All MHPSS related activities, across all sectors, will be included under the umbrella MHPSS indicator.

Indicator:

of individuals participating in MHPSS services and activities

What the Indicator Tracks for MHPSS:

This indicator **includes all MHPSS activities** under all sectors (protection, child protection, GBV, health, education etc.) and measures the number of individuals participating in mental health and psychosocial support services/activities during the reporting period. The indicator is intended to provide agencies and organizations implementing the RRP with insight into the reach of services provided as well as capture the types of MHPSS services provided. Please include the three mandatory activities under this indicator which are divided according to the different layers of supports within the IASC MHPSS pyramid of interventions. See “Key Terms and Definitions” section later in this document for definitions of the activities included in this indicator.

This regional MHPSS indicator includes the following country-level MHPSS activities:

- # of individuals that participated in community and family supports (structured or unstructured like sport, art, music, drama, recreational, traditional/cultural activities, peer support etc, with MHPSS components and implemented by staff trained in MHPSS) (level 2 of IASC pyramid)
- # of individuals who participated in focused individual and group psychosocial support (level 3 of IASC pyramid)
- # of individuals who participated in specialised MHPSS services (level 4 of IASC pyramid)

Additional disaggregation required:

- Age
- Gender

Reporting Considerations:

- **How to Report:** Individuals participating in MHPSS services should ideally be reported under the cross-sectoral MHPSS indicator activities as listed above. However, if at the country level, child protection or other sectors choose to include an activity under another indicator such as *# of children accessing MHPSS through child protection services*, please note that these MHPSS related activities will be automatically aggregated to the cross-sectoral MHPSS indicator.
- **Sectoral Disaggregation:** If any sector is interested in finding out how many individuals were provided MHPSS services by actors within their specific sector, please contact UNHCR’s IM team in country to disaggregate this data.

- **Important Note:** To avoid double counting, please only report individuals under a single MHPSS related activity, not multiple, especially if there are country level MHPSS activities specific to different sectors.

Recommended MHPSS Country Indicator:

of individuals trained on MHPSS topics or approaches (online/in person)

What the Indicator Tracks for MHPSS:

This indicator is highly recommended for all countries. It will include the number of people trained on MHPSS topics or approaches designed to strengthen capacity to provide MHPSS services to refugees and the host population as part of capacity building efforts. Please only report on trainings that were at least half a day or longer. For reporting partners, please ensure the MHPSS training data is reported using this MHPSS country indicator. See below definitions for guidance on the activities included in this indicator.

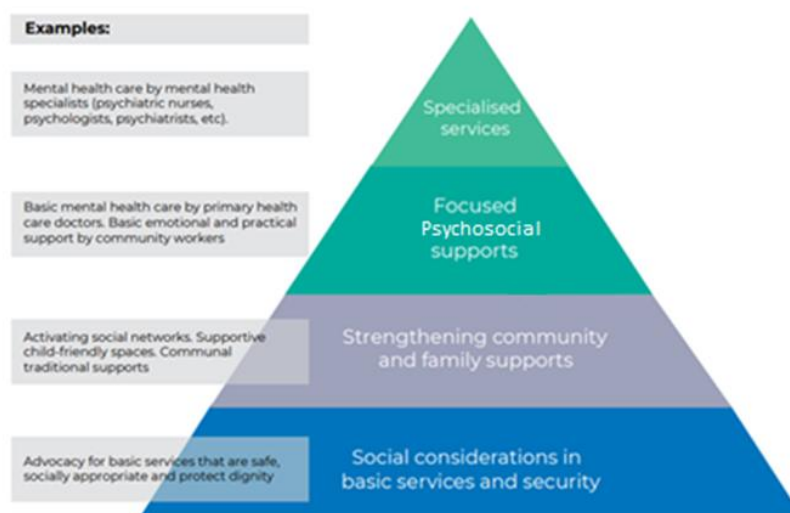
Technical Guidance: Mental Health and Psychosocial Support (MHPSS)

Mental Health and Psychosocial Support (MHPSS) is a composite term used in the [Inter-Agency Standing Committee \(IASC\) Guidelines for MHPSS in Emergency Settings](#) to describe “any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder”.

Among humanitarian agencies, the term serves as a unifying concept that can be used across various sectors, including Health & Nutrition, Protection (community-based protection, child protection and GBV), Education, and Livelihoods. Activities related to MHPSS are intended to address mental health and psychosocial problems, including social problems, emotional distress, common and severe mental health conditions, alcohol and substance abuse, and intellectual and developmental disabilities.

MHPSS programmes are often conceptualised as a pyramid of several layers of complementary support, with referral systems between the layers. It is important to provide support across the layers of MHPSS services, ranging from interventions that benefit all persons of concern to targeted interventions for specific groups, because people react differently to emergencies and therefore have varying needs for support. The model for layered supports is illustrated below (IASC intervention pyramid):

In the humanitarian system, MHPSS is not a sector by itself, but a multi-sectoral issue constituted of activities within various sectors. Consequently, **accountability for implementation, monitoring and evaluation of MHPSS activities lies within all sectors which are providing and supporting MHPSS activities**, including Health,



Protection, Child Protection, and Education actors.

The aim of this guidance note is to align key humanitarian indicators related to MHPSS across all agencies and organizations engaged in the implementation, monitoring and reporting of the Ukraine Refugee Response Plan (RRP). Results should be interpreted, recorded, and reported in the same way across the different planning and reporting platforms, using standard definitions of key humanitarian indicators at country, regional and global levels. This will help to harmonize external reporting of country, regional and global results and communicate effectively to donors and the general public on issues around MHPSS.

What is a MHPSS Activity?

MHPSS interventions and activities must have the overall goal of reducing suffering and improving mental health and well-being. However, the type of MHPSS activity is based **on the primary aim of the activity** and if it was **conducted by a provider who has received appropriate training in MHPSS skills**. To be counted as a MHPSS activity it should have a clear **MHPSS objective** and include **MHPSS components** (e.g., information about common mental health reactions, identifying emotions, practicing coping skills, exchange of peer-support). When possible, it is highly advised that the MHPSS outcomes and impact of the activity also be measured (e.g., change in participant wellbeing from pre-intervention to post-intervention).

Please note that simply integrating an *MHPSS lens* into an activity (e.g., distributing food and other aid in a way that promotes safety, dignity and empowerment) is important for ensuring service quality and avoiding doing harm, but does not mean that this activity constitutes an MHPSS activity for reporting purposes.

Example MHPSS Activities:

A recreational peer-support group for families with the goal of improving general well-being through social connection, that is facilitated by a psychologist, or a community psychosocial worker trained in basic psychosocial skills, would be considered a MHPSS activity.

A support group for adults experiencing moderate distress, with the goal of reducing suffering, conducted by a psychologist or psychiatrist, or a non-specialist community psychosocial worker trained on a [scalable intervention](#) would be considered a focused psychosocial support activity.

Key Terms & Definitions

Mental Health: A state of mental well-being that enables people to cope with the stresses of life, to realize their abilities, to learn well and work well, and to contribute to their communities. Mental health is an integral component of health and well-being and is more than the absence of mental disorder.

Psychosocial Wellbeing: This refers to the psychosocial dimension of well-being. Although there is no widely agreed definition, practitioners often use the adjective “psychosocial” to describe the interaction between social aspects (such as interpersonal relationships and social connections, social resources, social norms, social values, social roles, community life, spiritual and religious life) and psychological aspects (such as emotions, thoughts, behaviour, knowledge and coping strategies) that contribute to overall well-being.

Community and Family Supports (Level 2 of IASC MHPSS pyramid): These are activities and interventions that aim to build on existing individual and community resources, capacities, and

resilience. These activities include key **MHPSS components** such as identifying common reactions to stress, teaching positive coping skills, and building social connections and community cohesion. These approaches also contribute to restoring and/or strengthening those collective structures and systems essential to daily life and well-being. In many cases, these consist of community-based approaches grounded in the understanding that communities can be drivers for their own care and change and should be meaningfully involved in all stages of MHPSS responses. Using community-based MHPSS approaches facilitates families, groups and communities to support and care for others in ways that encourage recovery and resilience. Service providers at this level may include multisectoral providers such as teachers, social workers, or community health workers, as well as non-specialist community leaders or volunteers, all of whom must have received training specific to MHPSS in community and family supports.

Examples of community and family supports:

- *Structured or unstructured creative, cultural, recreational, arts, and sports activities for children, adolescents and adults (with MHPSS components)*
- *Life skills and peer-to-peer groups for adolescents and young people*
- *Support groups for adults, parents etc. including peer support or self-help groups*
- *Communal activities that support communities to re-establish rituals or cultural events (e.g., commemoration events to foster communal healing, cultural festivals or religious celebrations) (with MHPSS components)*
- *Support for community sporting or other cultural events and/or spaces to engage children, families and communities (with MHPSS components)*
- *Dissemination of information or messages about common MHPSS reactions and positive coping strategies designed to improve wellbeing and/or to reduce MHPSS stigma and promote help-seeking (when provided by a provider directly to participants). NOTE: Messages disseminated entirely online or in paper version should not be reported under the cross-sectoral MHPSS indicator.*

Focused Psychosocial Support (Level 3 of IASC MHPSS Pyramid): These activities and interventions refer to structured sessions with individuals or groups of individuals, that have a therapeutic outcome as their goal. They target individuals with mental health reactions or those at risk of developing such reactions. An important characteristic of focused psychosocial support is its particular emphasis on supporting and maintaining well-being as well as following ethical guidelines such as those between a counsellor and the counselled persons. Service providers at this level include trained MHPSS providers in fields such as social work and psychology, or non-specialist trained providers (e.g., humanitarian workers or community volunteers trained on basic counselling and how to provide emotional/practical support, including scalable psychological interventions).

Examples of Focused Psychosocial Support Activities:

- *Basic psychosocial support (e.g. empathetic listening, psychoeducation and coping skills practice, conflict resolution, Psychological First Aid (PFA), etc.).*
 - *Psychosocial support provided as part of case management can be counted here (although case management in general should not be counted unless it explicitly includes psychosocial support).*
- *Basic individual and group counselling (Counselling is a helping approach that highlights the emotional and intellectual experience of a client: how a client is feeling and what they think about the problem they have sought help for)*
- *Scalable psychological/psychosocial interventions which can be implemented by non-MHPSS specialists (e.g., PM+, Self Help +, EASE, I Support My Friends)*

Specialized Services (Level 4 of IASC MHPSS Pyramid): These activities and interventions refer to clinical services designed to address symptoms associated with common and severe mental health conditions. They include identifying mental health conditions, engaging and building relationships with people with mental health conditions, psychotherapy (e.g., cognitive behavioural therapy, interpersonal therapy for depression, or EMDR) and pharmacological management of mental health

disorders. These are interventions that are implemented by mental health specialists (i.e., psychiatrists, licenced clinical psychologists, psychiatric nurses or clinical social workers).

MHPSS Training: These activities focus on building capacity and skills in recommended methods and practices within the field of MHPSS. This includes training health care or protection professionals, community workers, volunteers, teachers, etc., on MHPSS topics, tools, interventions and approaches recommended for use in emergencies. This includes but is not limited to IASC Guidelines; MHPSS Minimum Services Package, PFA, Basic Psychosocial Skills, basic psychosocial counselling, training in models such as I Support My Friends and Helping Adolescents Thrive, in scalable psychological interventions (such as Problem Management Plus, EASE, Self Help Plus, Interpersonal Therapy, Doing What Matters in Times of Stress) and trainings to help providers to identify and manage mental health conditions (for example through mhGAP trainings).

Key MHPSS Guidelines & Resources

The above definitions of key terms were based on the following guidelines and resources in the field of MHPSS. Please refer to them when planning and/or reporting on MHPSS related activities across sectors.

- [IASC Guidelines MHPSS in Emergencies](#)
- [IASC MHPSS Minimum Services Package](#)
- [IASC Who is Where, When, Doing What in MHPSS \(4W Tool\)](#)
- [IASC Common Monitoring and Evaluation Framework for Mental Health and Psychosocial Support in Emergency Settings: With means of verification \(Version 2.0\)](#)
- [IASC Community-Based Approaches to MHPSS Programmes: A Guidance Note](#)
- [IOM The Manual on Community-Based Mental Health and Psychosocial Support \(MHPSS\) in Emergencies and Displacement](#)
- [IFRC PS Centre MHPSS Guidance Website](#)
- [Minimum Standards on Child Protection in Humanitarian Action](#)
- [UNHCR Community-Based Protection & Mental Health & Psychosocial Support](#)
- [UNHCR Emergency Handbook: Mental Health and Psychosocial Support](#)
- [UNHCR Operational Guidance Mental Health & Psychosocial Support Programming for Refugee Operations](#)
- [UNICEF Community Based Mental Health and Psychosocial Support in Humanitarian Settings](#)
- [WHO/ UNHCR Assessing Mental Health and Psychosocial Needs and Resources](#)
- [WHO Mental Health Gap Action Programme \(mhGAP\)](#)
- [WHO World Mental Health Report: Transforming mental health for all](#)