MHPSS TWG Meeting minutes

Date: 26 November 2025, 10.00-11.45

Organizer: WHO Country Office for Poland, in collaboration with partners

Format: Online meeting with participation from technical working group members, new working group members, invited experts, and stakeholders. Meeting held in Polish and English (simultaneous interpretation was provided)

Chaired by: Joanna Głażewska WHO

Participants: Miriam Aertker (UNHCR), Tetiana Kovrihina-Podolinna (UNHCR), Anna Ochmańska (IOM), Aleksandra Mosiołek (UNICEF), Izabela Ciuńczyk (OSCZP), Katarzyna Szczerbowska (F.Kropka), Dariusz Baran (PTP Podkarpacie), Kamil Pięta (CZP Wieliczka), Monika Biegun (CZP Wieliczka), Paulina Brożyniak (Caritas Polska), Joanna Hajduk (Save the Children), Irina Ivanova (Zustricz Krakow), Justyna Klingemann (WIM-PIB), Olga Komadinko (Fundacja ADRA), Roma Kula (Americares), Jan Marković (PSAR), Piotr Popowski (Medical Univ/Polish Society for Health Programs), Rehina Romanenko (Fundacja Avalon), Lesya Savytska (Kalejdoskop Kultur), Piotr Toczyski (Academy of Special Education), Izabela Trybus (Polish Center for Torture Survivors), Oksana Vitvitska (Polish Red Cross), Julia Włodarska (PAH)

Information on the establishment of the new MHPSS Working Group and on the progressive closure of work in the current format

Presentation: Joanna Glazewska, WHO - attached, followed by discussion.

The Technical Working Group on Mental Health and Psychosocial Support (MHPSS) was established in Poland in 2022 as part of the Refugee Response Plan to address urgent mental health needs following the escalation of the war in Ukraine. The Group was co-chaired by WHO and UNHCR (along with a local partner) and brought together dozens of partners. The goal: to expand access to high-quality mental health care and psychosocial support for refugees, and increasingly for the broader population. Its work was guided by the Inter-Agency Standing Committee (IASC) Guidelines, emphasizing intersectoral coordination, evidence-based approaches, and the integration of psychosocial support with broader health and social care systems.

In August and September 2025, the WHO Country Office in Poland was reinforced with expert support, which helped assess current needs and develop a transition plan to

integrate the MHPSS Working Group with the Mental Health Council in Poland – the main intersectoral advisory body to the Minister of Health on mental health.

An integral part of the transition process was a year-long advocacy effort with national and local partners.

On October 16, 2025, at the culmination of this transition, the WHO Country Office in Poland, thanks to the openness and support of the Embassy of the Kingdom of the Netherlands in Warsaw, convened a high-level roundtable entitled “Strengthening Mental Health Support for Ukrainian Refugees in Poland: What Comes Next?”. Representatives from Polish institutions, civil society organizations, academic experts, and international partners participated.

The transition is moving from an internationally coordinated TWG to a national MHPSS Working Group. On November 4, 2025, the national MHPSS Working Group was formally established as a team within the Mental Health Council.

The coming months will focus on strengthening this structure (the group's ToR will be developed in the coming weeks) and building capacity. At the same time, local MHPSS Working Groups will be promoted in mental health centers to test coordination mechanisms at the local level.

This transformation is essential to building a resilient mental health system in Poland—one that ensures sustainable coordination, reduces stigma, and promotes the psychosocial well-being of all – including refugees and host population.

WHO and UNHCR are stepping down as co-chairs but remain as advisory partners, providing strategic advice, supporting the integration of international standards, and strengthening regional and local coordination.

The governance structure recommended by the WHO in 2025 to the MHPSS TWG and Mental Health Council should include rotating chairs, a secretary, and an advisory board composed of representatives from WHO and other relevant UN agencies, as well as national experts. Strategic goals include the progressive standardization of MHPSS activities, maintaining cross-sectoral collaboration, and building trust between partners, NGOs, academia, and local authorities.

Existing communication channels (Google Drive, mailing lists) remain accessible until 31 December 2025. Members are encouraged to download needed materials.

An ongoing survey to map partner activities remains open until 15 December 2025 to support capacity building for the new group:

https://forms.office.com/Pages/ResponsePage.aspx?id=t8AQ9iS9OUuBCz3CgK-1kI3qpziP8ddGh-4mBXyHkBZUNFlCWE1LQklGVlFERldJQUFZOEVFTTBVRi4u

The meeting underscored that this transition represents a transformation and continuation of activities, not their end. Key principles guiding the transition include inclusive leadership, organizational and institutional stability, and adherence to international standards. The national group will focus on strengthening coordination at both national and local levels – it is especially important in a large and diverse country like Poland.

WHO and other UN agencies remain committed to supporting the new group with strategic advice, technical assistance, and promoting regional and local coordination networks.

The transition process is designed to be smooth and effective, ensuring continuity of knowledge, documentation, and resources accumulated over four years of work.

The meeting was attended by both co-chairs of the newly established group: Dr. Izabela Ciuńczyk (OSCZP) and Katarzyna Szczerbowska (F.Kropka).

Cooperation among local partners – experiences and next steps.

Presentations from the newly established Working Group's Co-Chair and Local Perspectives – 3 presentations attached.

Dr. Izabela Ciuńczyk, co-chair of the new national group and chair of the Nationwide Mental Health Centers Association, presented a brief overview of the Mental Health Centers pilot program in Poland.

Since 2018, Mental Health Centers have functioned as the primary care level for adult psychiatric services covering about half of Poland's population, with an 8-year pilot extended until December 2026. The Centers are legally mandated to provide coordinated, immediate, and continuous psychiatric care tailored to patient needs, including integration with social support and self-help groups in their catchment areas. Centers operate with a global budget from the National Health Fund, allowing planned collaboration with local social and governmental institutions, including police and social services.

Dr. Ciuńczyk illustrated the extensive local multisectoral networks built around Centers, involving medical, social, educational, and NGO partners to address complex patient needs including housing and employment.

Four main challenges were emphasized for the future system: need for a political decision on the system post-2026; legal basis for mandatory multisectoral cooperation; clear data protection and confidentiality regulations for information exchange; and development of therapeutic and diagnostic standards for mental health crisis intervention.

Local examples from Koszalin showed successful network building, while other regions like Podkarpacie and Rzeszów face challenges due to absence of such centers, resulting in fragmented service provision and poor coordination.

Dariusz Baran (Polish Psychiatric Society, Podkarpackie branch) provided a detailed overview of psychiatric care in Rzeszów, stressing the lack of a Mental Health Center and resultant fragmented care. Presented statistical data shows low levels of community and day psychiatric care compared to national averages. He described social assistance institutions employing psychiatrists in outreach roles, operating outside formal psychiatric systems. Heccalled for systemic solutions, formal coordination, and integrated multidisciplinary care models.

Monika Biegun (Local Coordinator, Wieliczka Mental Health Center) shared experience of formalized local intersectoral cooperation since 2018, with regular meetings involving social services, psychological counseling, local government, NGOs, and community members including clergy and veterinarians. She emphasized the importance of formal agreements and authentic dialogue in sustaining effective collaboration.

Other interventions summary

Izabela Trybus (Psychotherapist, Białystok, Polish Center for Torture Survivors): Emphasized urgent local shortages of trained specialists to support war-affected refugees, especially near the Ukrainian border. Highlighted the need for training beyond Mental Health Centers, including social services and schools. Noted the pilot trauma-related mental health program.

Piotr Popowski (Medical University, Polish Society for Health Programs): Pay attention to the integrative approach and the need of collaboration with primary care providers, noting past research showing low mental health knowledge among GPs.

Joanna Hajduk (Save the Children): Urged for specialized support and training for professionals working with children affected by war, including school psychologists. Highlighted challenges in diagnosing and supporting refugee and migrant children in Polish systems. Advocated for long-term, school-based psychosocial support programs fostering community integration.

Aleksandra Mosiolek (UNICEF Child Protection Specialist): Emphasized interdisciplinary cooperation among social services, child protection, and mental health sectors for vulnerable children at risk of violence or exclusion. Suggested stronger collaboration with centers for integration of foreigners, which provide obligatory psychological support for refugee children.

Oksana Vitvitska (Polish Red Cross): Presented nationwide certified training programs on first aid and psychological first aid for volunteers and NGO workers. Invited participation in ongoing training and expressed commitment to collaborate with the new national group.

Piotr Toczyski (Academy of Special Education): Shared experience from European projects on local alliances against depression, offering methods to initiate and sustain multisectoral local cooperation even without formal regulations. Offered expertise and resources to support local and national mental health coordination efforts.

Jan Marković (Podkarpackie Stowarzyszenie Aktywnych Rodzin, Rzeszów): Described activities including a psychological support center serving about 10,000 mostly Ukrainian refugees and a youth club for vulnerable youth. Noted the absence of a formal Mental Health Center in Rzeszów, causing fragmented services and poor coordination. Highlighted shortages of psychiatric specialists and challenges faced by Ukrainian youth including discrimination and future uncertainty. Expressed readiness to contribute experience for coordinated care development.

Anna Ochmańska (International Organization for Migration): Described IOM's multidisciplinary teams supporting refugees in Podkarpackie, Małopolska, and Mazovia, focusing on the most excluded populations in collective accommodation centers with limited mental health support. Highlighted capacity-building programs for local institutions on intercultural competencies and inclusion of Ukrainian mental health specialists. Shared experience with health mediation projects addressing cultural and language barriers. Expressed willingness to cooperate with the new group and align future programs with identified needs.

The new national group is expected to address defined gaps by integrating local experiences and promoting system-wide standards.

WHO and partners reaffirm their commitment to provide technical support and facilitate linkages between national and local actors.

AOB

Concerns were raised about commercial misuse of the WHO-developed MHPSS method PM+ which is intended as a freely available tool. WHO urged all stakeholders to promote these tools as free public goods and to safeguard ethical use and accessibility.

Closing Remarks

The meeting marked the formal closure of the Technical Working Group in its international coordination format and the opening of a new chapter under national leadership.

Participants expressed gratitude for the collaborative work achieved and reaffirmed their commitment to continue advancing mental health and psychosocial support services for refugees and host communities in Poland.

The UN family in Poland stands ready to support the new group with their expertise and networks.

It was acknowledged that many barriers remain, but continued collaboration and shared commitment will be key to progress.

Attachments

Presentations shared during the meeting:

1. MHPSS TWG 26.11.2025 WHO

2. MHPSS 26.11.2025_dr Izabela Ciuńczyk

3. 20251126 Sieć współpracy w ramach opieki psychiatrycznej z oparciem społecznym w aglomeracji rzeszowskiej bez centrum zdrowia psychicznego_Dariusz Baran

4. Współpraca miedzysektorowa w CZP LDV Wieliczka