

Provision of mental health and psychosocial support services to health workers and community members in conflict-affected Northwest Syria: a mixed-methods study

Image: Northern Syria displacement camp. © European Union, 2023

Background

Northwest Syria (NWS) is a conflict area with challenging political, economic, demographic and social dynamics. The region has a high number of internally displaced persons with increasingly disrupted delivery of basic services, including healthcare.

Mental health needs have been increasing in the region while the infrastructure and capacity of the health sector has been negatively affected by the conflict. This study aimed to explore the provision of mental health and psychosocial support (MHPSS) services to communities in NWS (including healthcare workers) and to assess the experiences of beneficiaries with MHPSS services.

Methods

A mixed-methods research design that included qualitative and participatory methods (44 semi-structured interviews and a group model building workshop with 15 participants) and a survey with 462 beneficiaries.

Results

Findings suggested an improvement of MHPSS services in the region over the last few years due to the creation of a specific Technical Working Group for MHPSS that contributed to assessment of community needs and support of the MHPSS response. The key elements of this response were:

- (1) training non-specialized health workers to address the shortage in specialized providers
- (2) securing funding and coordination of services between different organizations
- (3) addressing gaps in the availability and geographical distribution of other needed resources, such as medicines.

While those elements contributed to improving access to services and the quality of services—especially among health workers seeking MHPSS services - findings suggested gaps in the sustainability of services and a need to scale up those interventions in an integrated approach.

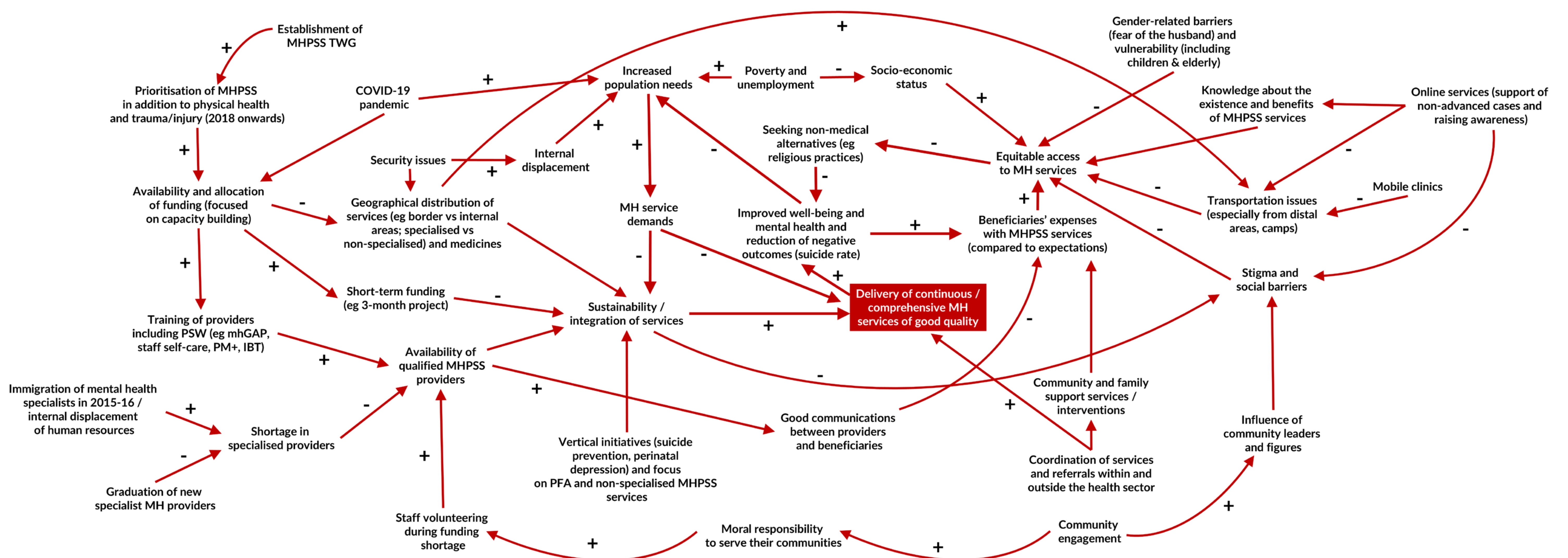


Figure 1. Causal loop diagram showing the dynamics of MHPSS service provision in Northwest Syria

Conclusion

The study findings add to the evidence base on the challenges in scaling up MHPSS interventions and their long-term sustainability concerns. Priority actions should address the intermittent funding of the MHPSS response, incorporate MHPSS outputs and outcomes in the reimbursement of routine services, improve coordination between health partners and non-health actors in order to expand the scope of MHPSS response, and address the inequitable availability of resources in the region.

