

# Mental Health and Psychosocial Support During Emergency

## MdM's Experience in Armenia

### June 2025

**POINT INFO**  
**MdM NEWS**



**2025**  
Jeudi  
Thursday



# Initial emergency Response and Goris Emergency Center September 2023

**Initial Response (September – October 2023):** Médecins du Monde was among the first responders during the emergency displacement crisis in Armenia. The coordination team was actively preparing and communicating with authorities to receive displaced individuals from Artsakh. Initial activities began in Goris, Syunik region, funded by the Start Fund.

**Goris Emergency Center:** The center evolved into a community hub hosting various organizations, partners, consortium members, government services, and volunteer doctors. Key partners included Mission Armenia, People in Need, Goris Polyclinic, and Viva volunteer doctors.





# MHPSS Support and Team

## Ensuring safety, dignity, and well-being during displacement

**MHPSS support:** MdM provided first-line mental health and psychosocial support (MHPSS) Services, to displaced persons from Artsakh. Basic humanitarian needs were met through the distribution of hygiene kits, clothing, and essentials by MdM, volunteers, and partners.

**Team and purpose:** The immediate response focused on addressing urgent psychosocial needs of displaced individuals. MdM provided psychological first aid (PFA), basic psychosocial support, social work support, and referrals to specialized services. Medical consultations and interventions were conducted by VIVA volunteer doctors. The team included social workers, psychologists, community mobilizers, medical officers, and support staff.

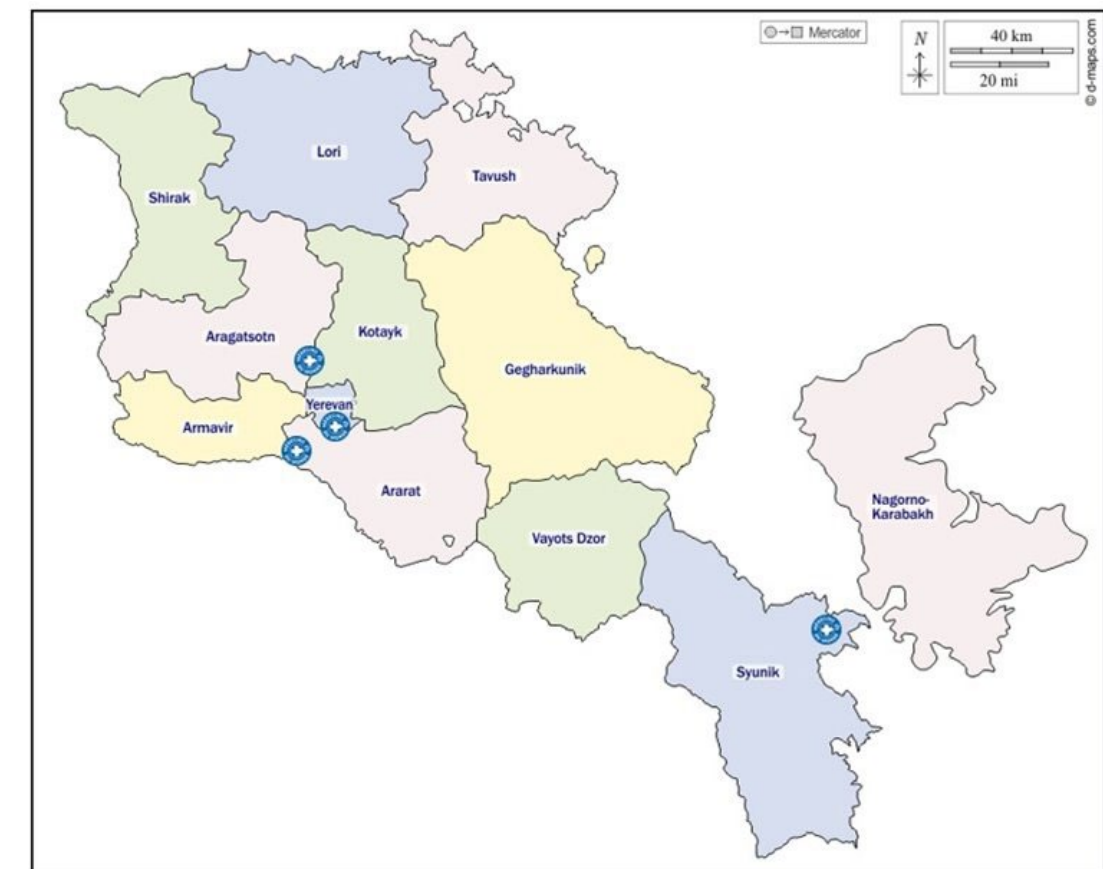


# MHPSS Program Expansion and Objectives

**Program Expansion:** The need to expand services was evident based on assessments of displaced populations from Artsakh, the lack of presence of other actors providing MHPSS services, and the movement of displaced people into various regions across Armenia. MdM commenced activities in Ashtarak (Aragatsotn region), Yerevan, Masis (Ararat region), and continued activities in Goris (Syunik region).

**Objectives:** Key objectives included preventing mental health crises, preserving dignity, promoting emotional recovery, and ensuring access to essential services.

**Multidisciplinary Team:** Each center was staffed with a team of specialists, including social workers, psychologists, community mobilizers, medical officers, and support staff. The team adopted a holistic and synergetic approach to achieve improved mental health and general wellbeing of beneficiaries.



# Key Activities Implemented



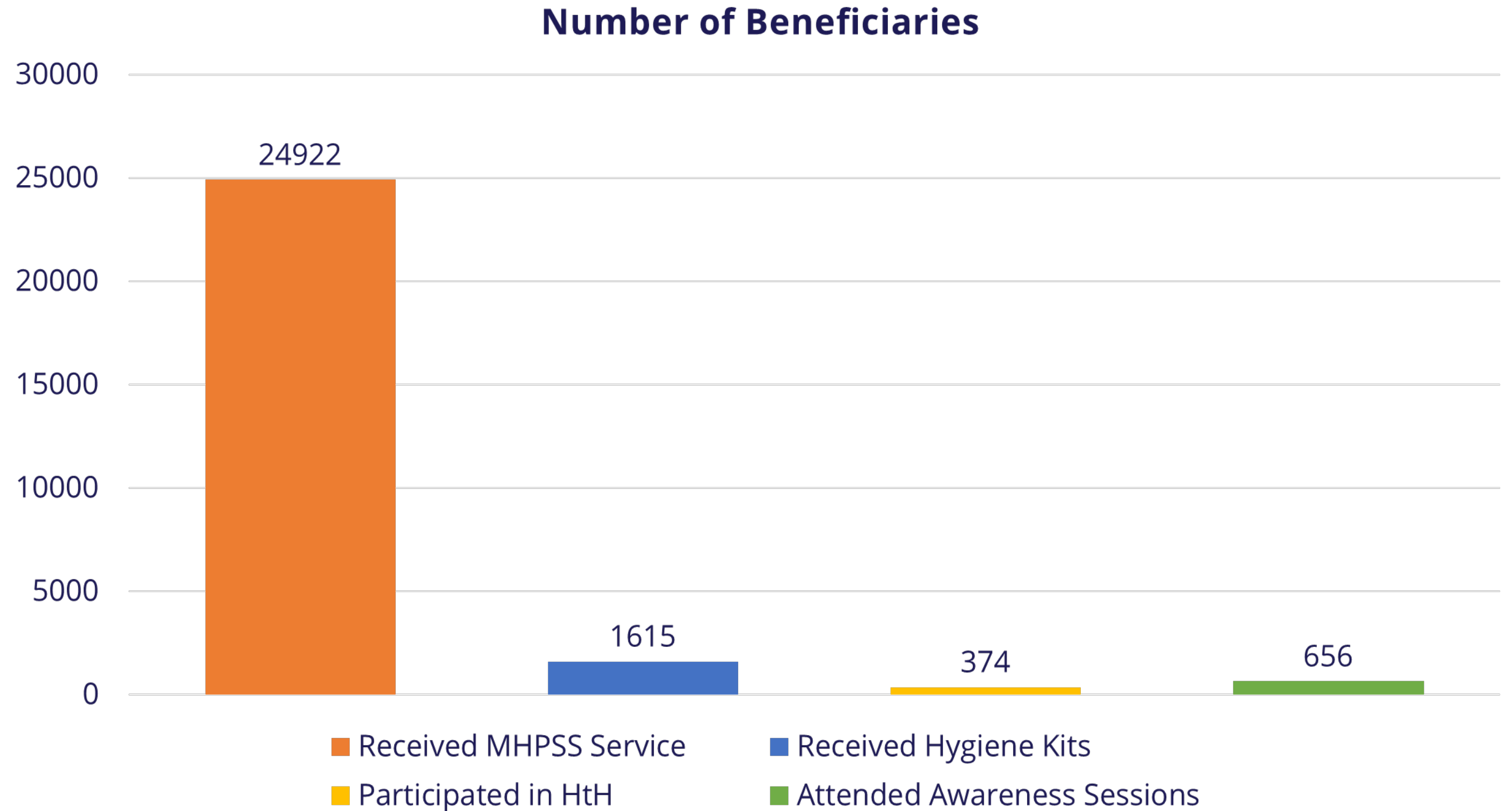






# Results Achieved

## Nov 23 - March 25

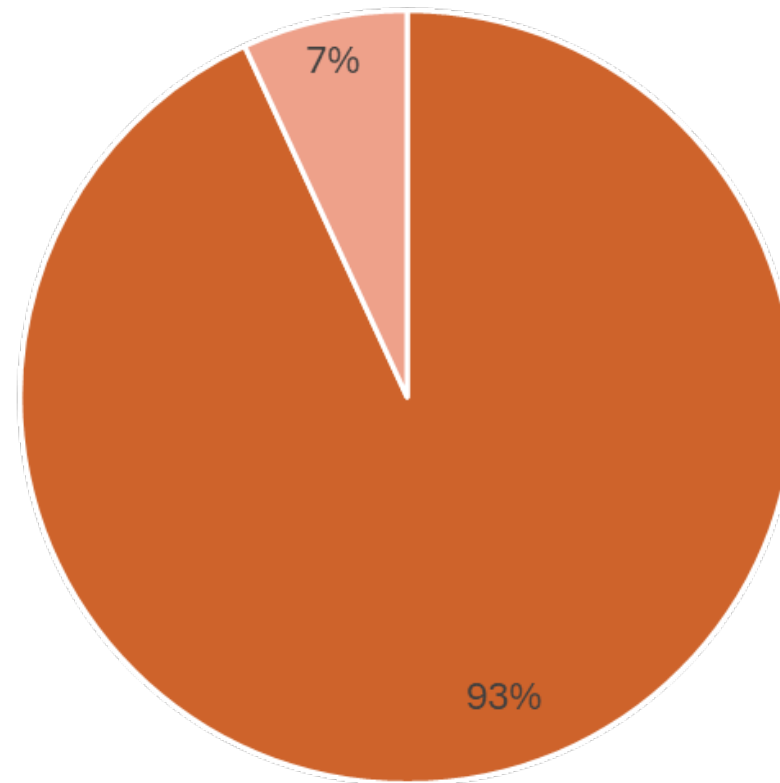


# Results Achieved

## Nov 23 - March 25

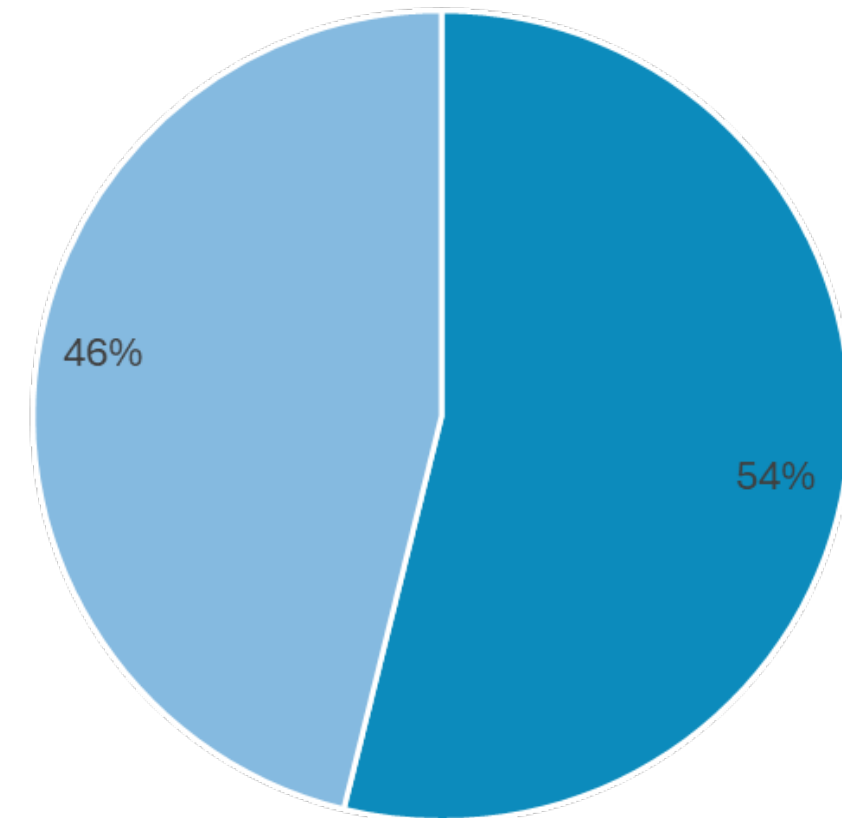
Beneficiaries

■ Displaced ■ Host



Beneficiaries

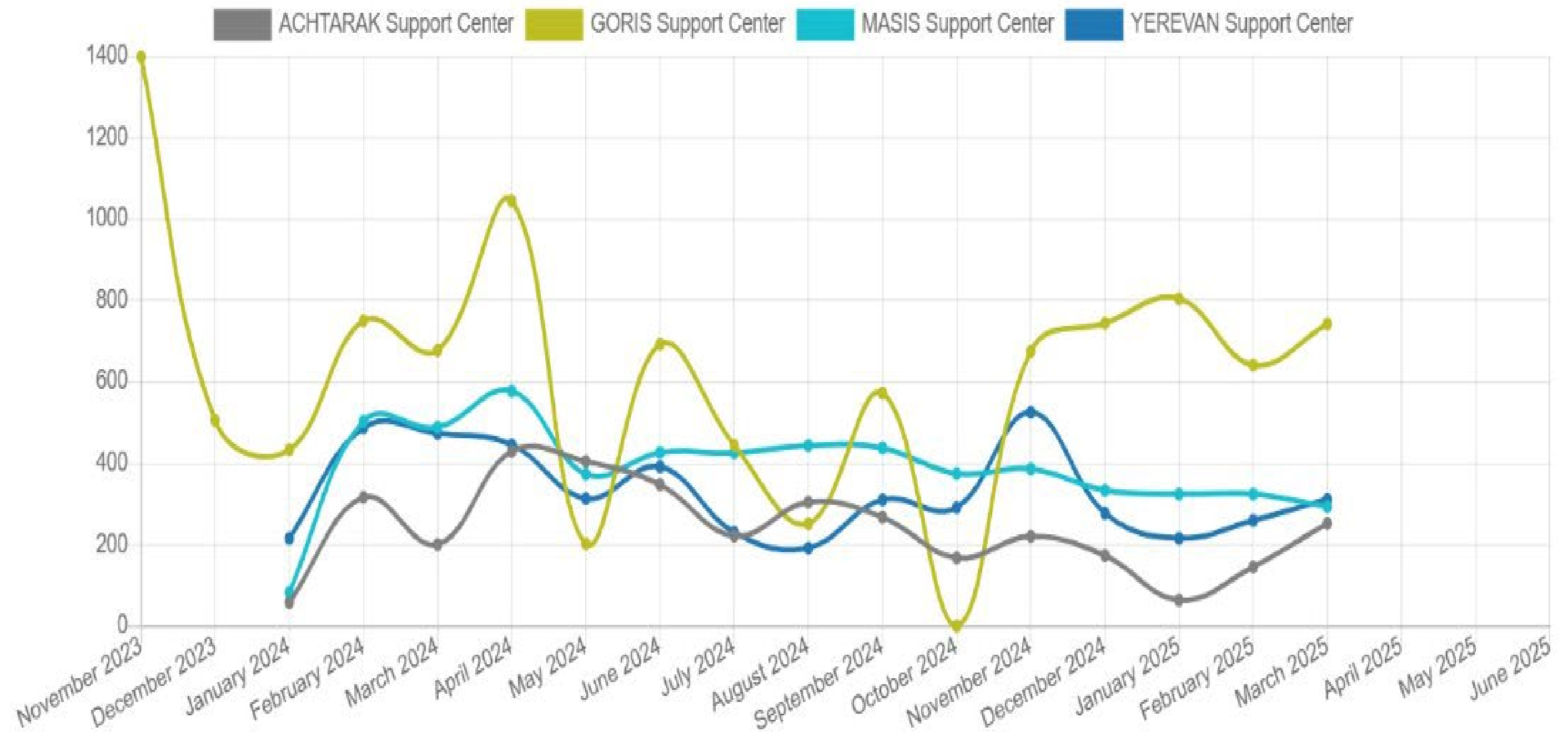
■ Women ■ Men





# Results Achieved

## Nov 23 - March 25



# Advocacy Material

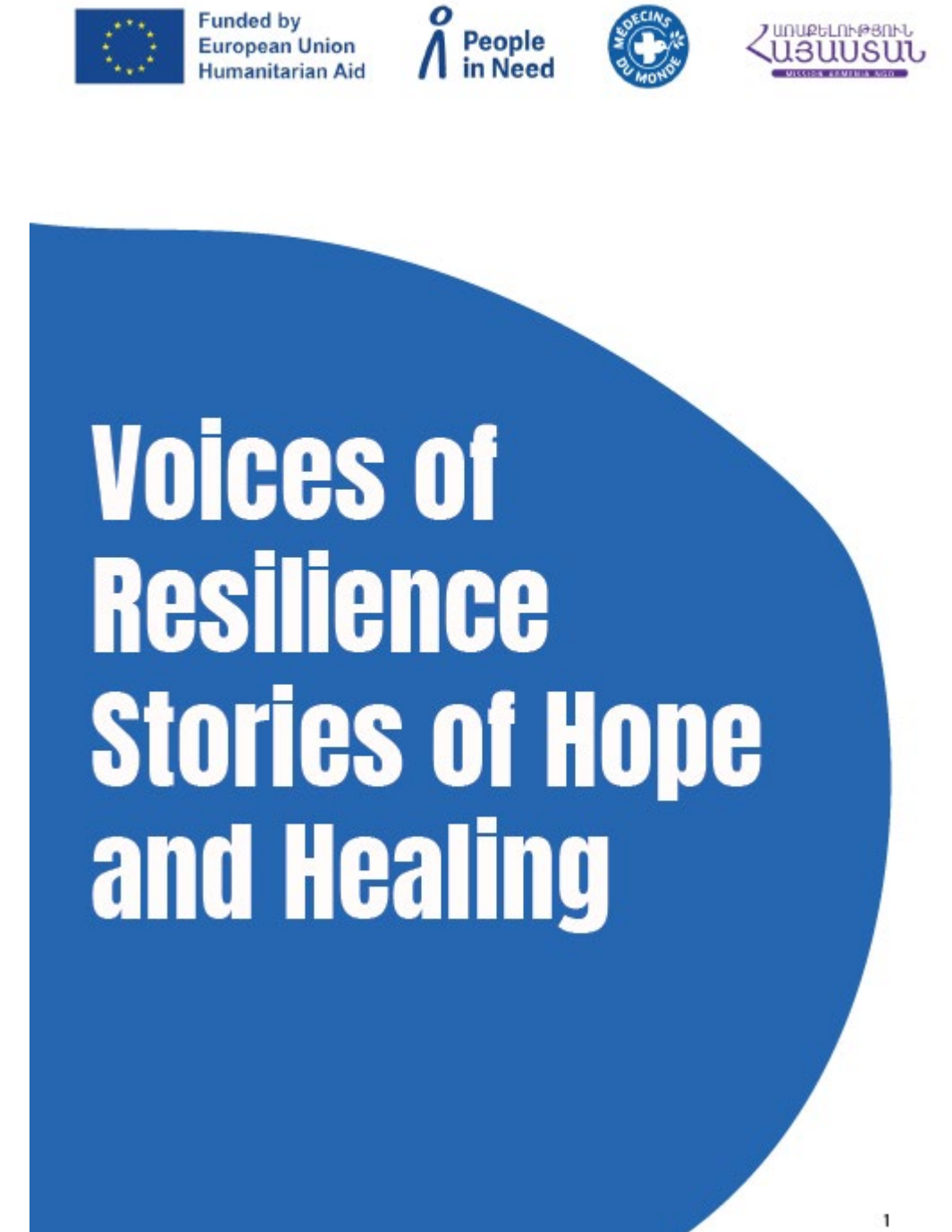


**Funded by European Union Humanitarian Aid** **People in Need** **MEDECINS DU MONDE** **ՀԱՅԱՍՏԱՆ**

## HOW ARE YOU TODAY

- 1 What is Mental Health?**  
Mental health is as important as physical health.
  - Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act.
  - Good mental health helps us manage stress, relate to others, and make positive choices.
- 2 Why is Mental Health Important?**  
Taking care of our mental health gives us resilience and strength to lead fulfilling lives.
  - Supports stronger relationships
  - Helps us overcome challenges and setbacks
  - Enables us to reach our goals and find purpose in life
- 3 Seeking help is a sign of strength, not weakness.**
  - Together, we can support each other and create a world where mental health care is accessible and valued

**Need support or want to learn more? Visit MDM Armenia Facebook page**





# Community Impact

## **1.Improved Psychosocial Well-being:**

Reduced symptoms of anxiety, stress, and depression among participants strengthened individual coping mechanisms and emotional resilience.

## **2.Stronger Community Resilience:**

Group sessions fostered trust and solidarity, especially among women and caregivers outreach activities helped rebuild social support networks.

## **3.Increased Awareness & Reduced stigma:**

Communities became more open to mental health conversations greater understanding of when and how to seek help.

## **4.Inclusive Support to Displaced & Host Communities:**

Non-discriminatory service delivery to both displaced and host populations helped reduce social tension and build cohesion between groups.

# Voices From the Field

**“I carried this anger with me for so long, it became a part of who I was.”**

***I didn't think anyone could understand how I felt.*** But the counselor showed me it was okay to feel sad and that I wasn't alone. Slowly, I started to feel stronger, both in my body and my mind. ***Now, I'm finding ways to focus on what I can change, and that makes all the difference.***

I never thought I could feel this way again. ***For so long, I thought I was the problem, that I was unworthy of love or happiness.*** But through these sessions, I finally understood that it wasn't my fault. I'm learning to believe in myself, and I know I can overcome this

***“I never thought my body could react this way to something emotional. Losing my father was a pain I buried deep, but it found its way out through my body.”*** Talking to the psychologist helped me see the connection and begin healing in ways I didn't think were possible. I've regained control of my life and no longer feel trapped by pain or grief.”

**“Before seeing the psychologist, I felt like I was drowning in sadness and guilt. I didn't think I could ever feel better.”**



# Challenges and mitigation measures

- **Stigma around mental health:** cultural stigma and fear of judgment discouraged many individuals from seeking mental health or psychosocial support, especially in more conservative or rural areas.

## Mitigation measures:

- Conducted awareness sessions and psychoeducation to normalize mental health conversations.
- Engaged community leaders and influencers to act as mental health champions.
- Integrated MHPSS support within general services, reducing the label of “mental health” and increasing acceptability.

- **Limited access to services:** displaced individuals, especially those in remote or informal settlements, faced physical and logistical barriers to accessing services.

## Mitigation measures:

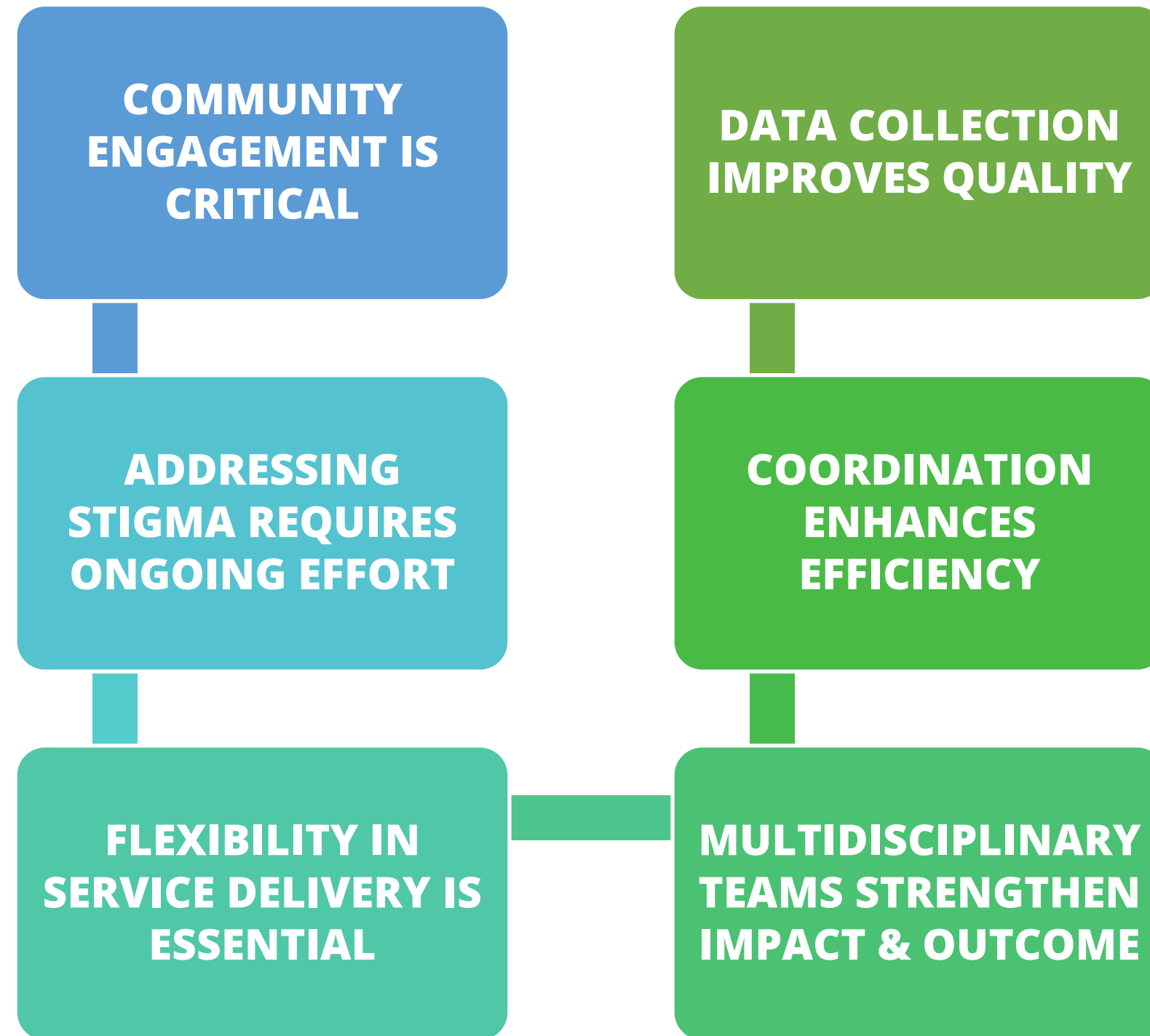
- Conducted home visits to reach isolated populations.
- Expanded geographic coverage by opening additional centers in Ashtarak, Masis, and Yerevan.

# Challenges and mitigation measures

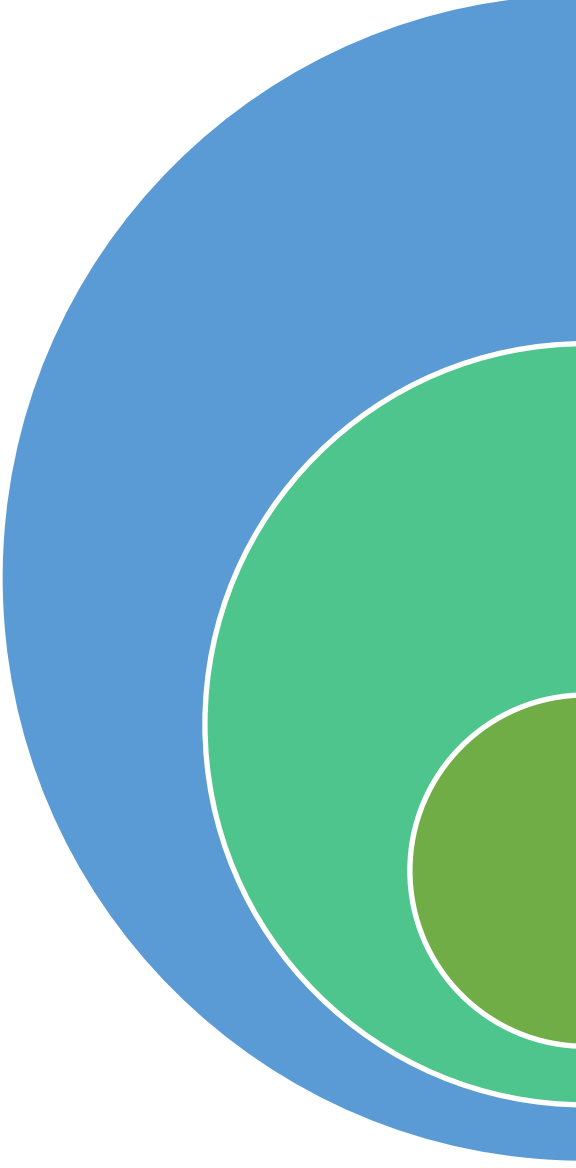
- **Availability of specialized services:** in some regions, there was a shortage of trained mental health professionals and limited referral pathways for more severe cases.  
Mitigation measures:
  - Established referral networks with national and local mental health institutions.
  - Provided capacity-building training for staff and local professionals.
  - Advocated with partners to strengthen system-level support for MHPSS within Armenia.
- **Turn-over of MdM staff:** Frequent turnover of MdM coordination staff in Armenia has disrupted continuity, delayed decision-making, and weakened stakeholder relationships, hindering the effective implementation of the MHSS project.



# Lessons Learned



# Sustainability and Way Forward



**MHPSS Pilot Program in Regions:** MdM will implement a pilot program to integrate mental health and psychosocial support (MHPSS) into primary healthcare (PHC) services through polyclinics. This will involve integrating mental health professionals into polyclinic teams (mainly social workers and psychologists), training of existing staff at the polyclinic (GPs, Family Medicine doctors, nurses, midwives, etc.), and ensuring that MHPSS services are accessible within primary healthcare settings. The initiative will focus on reducing gaps in mental health knowledge and integrating mental health considerations into all aspects of healthcare.

**Community-Based Services:** We will expand our community-based services by implementing sensitization activities and awareness sessions. We will continue to educate women, adolescents, and men on Mental Health and Well-being. Our aim is to increase awareness, reduce stigma, promote healthy behaviors, and improve access to Mental Health services, particularly for marginalized groups.

**Establishment of a Referral System:** A robust referral system will be established to ensure that individuals needing specialized mental health services or further medical care are referred to appropriate facilities in a timely and efficient manner. This system will facilitate coordinated care between different healthcare providers, including public and private institutions. Additionally, our teams will work on identifying and safely referring survivors of Gender Based Violence to relevant local organizations which provide care and support.



# Thank You

