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Experiences and observations from a health and mental health literacy point for displaced Ukrainian families in Sweden - group participatory co-creation methodology in reducing barriers to work.

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ABSTRACT

Background/Aims About 40 000 refugees from Ukraine affected by the ongoing war have come to Sweden. There is a high risk of trauma-related stress due to low local health and mental literacy care. Perceived good health is a human right, a requisite for work. Group intervention for refugees can reduce and prevent post-migration stress and anxiety (Ekblad, 2020). With the funding provided by the Social Fund during two projects in Västernorrland (1 October 2022 - 31 March 2024), we were able to implement an evidenced-based short intervention based on the participants' needs. Methods A mixed methods design with participatory methodology and evaluation was used. Data was obtained with a short questionnaire in Ukrainian. It included a visual analogue health-rating scale, observation, oral evaluation in groups and a short breathing exercise. For practical and ethical reasons there was no control group. Each group met five times in two hours, a total of 10 hours excluding pre- and post-assessment. Results Little more than 250 participants, mostly women, participated from seven municipalities. In the first-year project, the participants showed significantly better perceived health as assessed on a visual analogue scale and less stress and anxiety. It was supported by the participants' questions which were qualitative evaluated using thematic content analysis. Five general themes stemmed from questions raised in dialogue with the participants plus observation with the respective local expert. Their questions received answers, and their perceived negative attitudes to authorities changed to more positive ones (Ekblad, Gramatik, and Suprun,2024). Preliminary data from the second-year project showed increased participant engagement despite shorter project duration. Our initiative served as a vital link between Swedish institutions and Ukrainian refugees, reducing stress and providing clarity on their immediate future. However, we recognize growing needs and challenges, including preliminary qualitative findings: - Gender disparity in employment access: Men find jobs faster than women. - Rising divorce rates. - Teenagers returning to Ukraine due to integration difficulties. - Burnout hindering refugees' language learning, education, and employment. - Decrease in support from Swedish families and other parties due to fatigue. Conclusion Due to barriers, there is a great risk that there will be a cost not only for the individuals and their families but also society. Most of the participants want to stay here besides barriers to job and health services. The longer refugees reside in Sweden, the more acute their need for ongoing support becomes (Ekblad, Gramatik and Suprun, under review).