

Supporting Mental Health and Integration: Long-Term Solutions for Displaced Ukrainians in Sweden

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The full-scale Russian invasion of Ukraine on February 24, 2022, became a global challenge for the international community. Over 6 million Ukrainians fled their homes and entered the reality of displacement and an uncertain future across Europe. The third year of the war has turned emergency response into lasting challenges for the host countries, with mental health needs among displaced populations often left unaddressed.

This Policy Brief summarizes findings from the *Better You&Me* project,² conducted within the non-governmental organization (NGO) *Help Ukraine Gothenburg* (HUG)³ between 2023 and 2025. The main aim of the project is to support the mental health and integration of displaced Ukrainians in Sweden. The findings suggest that mental

¹ Alongside the authors, Nadiia Kvasha and Eliza Kravchenko from the NGO Help Ukraine Gothenburg (HUG) have acted as editors and contributors to this Policy Brief.

² Within this Policy Brief, the usage of the term **programme** refers to the conceptual framework that defines the rationale, goals, directions, methods, and forms of interventions, while the term **project** refers to the concrete implementation of specific activities within that framework.

³ This Policy Brief was initiated by the NGO Help Ukraine Gothenburg (HUG). The authors of this Policy Brief, Viktoriia Svidovska (PhD in Pedagogical Sciences) and Yaroslava Shven (PhD in Psychology), are both involved in the *Better You&Me* project by HUG and have extensive backgrounds within psychology. Svidovska is currently a researcher and mental health coach, and Shven is a team leader for mental health coaches and methodologist at HUG since 2023.

health and integration are closely interconnected, and that comprehensive and culturally sensitive long-term support plays an important role in strengthening both.

Background

Founded in March 2022, HUG became one of the first NGOs in Sweden to provide emergency support for Ukrainians displaced by war. In its initial phase, HUG offered transitional housing, food, hygiene items, and medical aid to newly arrived Ukrainians before they could access state and municipal services in Sweden. Early initiatives also included Swedish and English language classes, job fairs, activities for children and young people, summer camps, and civic orientation lectures and workshops, reaching over 1,500 participants.

Many Ukrainians turning to HUG experienced grief, anxiety, a longing for home, and exhaustion related to integration demands,⁴ while mental health support was often perceived as limited or hard to access. To address this need and explore effective ways to support displaced populations, HUG designed and launched the *Better You&Me* programme in 2023.

EU Temporary Protection in the Swedish Context

Following the activation of the EU Temporary Protection Directive (TPD) (EU, 2001; EU, 2022) in March 2022, Sweden granted protection to Ukrainians fleeing Russia's full-scale invasion. The status ensures access to accommodation, basic healthcare, education, and the labour market. The protection has been extended three times on a yearly basis and is currently valid until March 2026 (EU, 2024).

The Swedish implementation of TPD is grounded in the Aliens Act (Sveriges Riksdag, 2005) and Aliens Ordinance (Sveriges Riksdag, 2006). By the end of 2023, 38,557 Ukrainians were registered as TPD holders in Sweden, and after the following year, in 2024 – 40,822 were registered, including those

⁴ Integration demands refer to navigating complex bureaucratic systems, learning a new language, securing housing and employment, and adapting to unfamiliar social norms, all while managing the emotional strain of displacement.

who had received a personal identity number⁵ (Migrationsverket, 2025; Statistics Sweden, 2025). According to the International Organization for Migration (IOM), 81% of Ukrainian respondents in Sweden taking part in their study indicated no intention to move from their current place of residence in the near future (IOM, 2024).

In May 2024, the Swedish government submitted the bill *Improved Living Conditions for Foreigners with Temporary Protection* to the Swedish Parliament (Regeringskansliet, 2024), which was later reviewed and approved by the Committee on Social Insurance (Sveriges Riksdag, 2024). According to the new legislation, Ukrainian TPD holders were granted access to the Swedish Population Register (*folkbokföring*), and, with some limitations, to the Swedish social support system.⁶ Ukrainians also became eligible for participation in the Swedish Public Employment Service's (*Arbetsförmedlingen*) integration programme, with increased financial support.

Despite legal provisions, access to mental health support remains limited for immigrants, as confirmed by previous research (Norredam et al., 2007; Satinsky et al., 2019). For Ukrainians, barriers to mental health support may include the lack of personal identity numbers in the first years upon arrival, limited knowledge of the healthcare system, limited proficiency in Swedish, limited awareness about mental health, stigma, and socio-economic insecurity (Shmulyar Gréen & Odynets, 2024; HUG, 2025).

Purpose and Research Questions

This Policy Brief investigates how access to comprehensive and culturally sensitive mental health support may affect both mental health and integration outcomes for Ukrainian TPD holders in Sweden. In line with this objective, this study was guided by the following questions:

⁵ Receiving a Swedish personal identity number (*personnummer*) means being registered in Sweden's population register. In June 2024, Ukrainian TPD holders who had resided in Sweden for two years were granted access to obtain a personal identity number. In November 2024, this access was extended to those who had been residing in Sweden for one year.

⁶ After registration in the Swedish Population Register, Ukrainian TDP holders who received personal numbers before November 1, 2024 got full access to various public services such as healthcare, education, and social benefits. However, the bill specifies that TPD holders who received personal numbers after November 1, 2024 are not entitled to residence-based benefits such as child allowance (*barnbidrag*), housing allowance (*bostadsbidrag*) and services for persons with certain functional impairments (LSS).

- What are the mental health challenges and associated risks reported by Ukrainian TPD holders in Sweden?
- What are the specific mental health needs within this group?
- How are mental health and integration interconnected through the lived experiences of Ukrainian TPD holders in Sweden?
- What role can comprehensive, culturally sensitive, and long-term mental health interventions play in improving both mental health and integration outcomes?

The *Better You&Me* Programme

Since 2023, the *Better You&Me* programme has offered a range of mental health support services with a focus on long-term integration. The programme is grounded in the *Subjective Well-Being Framework for Displaced Populations*, developed by the HUG research team (HUG, 2025). The framework defines key dimensions of well-being: emotional, psychosocial, and psychophysiological well-being, as well as sustainable integration.

As acknowledged in previous research (Greenspoon & Saklofske, 2001; Keyes, 2002; Wang et al., 2011), **mental health** is defined as a spectrum, ranging from positive mental health to reduced well-being and diagnosable mental disorders. **Subjective well-being** is closely linked to mental health and refers to a perceived quality of life and current experience.

Relevant dimensions of well-being have been defined across multiple models and studies (Ryff, 1989; Veenhoven, 1991; Wagnild & Young, 1993) and include: **emotional well-being** (emotional regulation, stability), **psychosocial well-being** (stable self-esteem, resilience, goal orientation, positive relationships, sense of belonging), and **psychophysiological well-being** (quality sleep, stable appetite, physical activity). **Sustainable integration** can be identified as an essential, group-specific criterion, reflecting both perceived access to rights and services and an internalised sense of participation across social, cultural, and economic domains (Berry, 1997; Ager & Strang, 2004; OECD, 2023).

The *Better You&Me* programme methodology is structured across four levels: crisis, short-, mid-, and long-term assistance. The support model combines individual and group-based formats, including emotional support

groups, psychoeducation,⁷ body-oriented practices, creative therapy, and community-based activities. Participation is available both online and offline, with flexible scheduling, and with formats adapted to different levels of digital literacy and mobility.

All interventions are guided by culturally sensitive, trauma-informed, and recovery-oriented principles, and have been adapted to the needs, experiences, language, and cultural background of displaced Ukrainians. **Cultural sensitivity** means actively engaging with individuals' values, beliefs, language, historical heritage, and recognizing how these experiences shape their behaviour (Resnicow et al., 1999). Specifically for Ukrainians, this includes awareness of the wartime context and the overall consequences of imperial oppression, e.g. collective trauma, collective memory distorted by violence, coping strategies and meaning-making in post-traumatic contexts.

Trauma-informed care (Clervil et al., 2013; Giacomucci, 2021; Burgund Isakov & Markovic, 2024) for Ukrainian TPD holders refers to a deeper understanding of trauma's effects⁸ and creating an environment free from unpredictability, pressure, judgment, and power imbalances, as these may trigger retraumatization. Interventions should focus on recovery through safety, respect, clear communication, non-verbal engagement (e.g. listening, drawing, moving), and restoring autonomy. Since research shows that trauma disrupts levels of trust, the key task is to help participants to regain stabilizing experiences.

Method

This analysis is based on quantitative and qualitative methods applied by HUG between August 2023 and January 2025, as part of the project *Better You&Me*. The Policy Brief is based on selected findings from a broader HUG report (HUG, 2025) that explored the integration experiences and mental health needs of displaced Ukrainians in Sweden.

⁷ Psychoeducation refers to providing information about mental health, emotions, and coping strategies to help participants better understand and manage their well-being.

⁸ Trauma's effects may include disrupting a person's sense of safety, identity, or continuity (DSM-5; Herman, 1992; Yehuda, 1992).

Table 1. Research Methods Overview (August 2023–January 2025)

Method	Period	Number of Participants	Description	Demo-graphics	Geographic Scope
Quantitative	Aug 2023	330 participants	CAWI survey ⁹ assessing mental and overall well-being, integration, need for assistance among displaced Ukrainians in Sweden	296F, 34M; 18–64 y.o.	Västra Götaland
Mixed	Jan–Feb 2024	280 participants	CAWI survey assessing the integration experiences, challenges, and needs among displaced Ukrainians in Sweden	230F, 50M; 18–75 y.o.	Västra Götaland
Quantitative	May 2024–Jan 2025	130 project participants	CAWI survey assessing the well-being among <i>Better You&Me</i> project participants	123F, 7M; 16–60 y.o.	National
Mixed	Nov 2024–Jan 2025	49 project participants	CAWI survey assessing the perceived changes in well-being from Jan 2024 to Jan 2025 among <i>Better You&Me</i> project participants	Age and gender unspecified	National

⁹ CAWI is an online self-administered survey method that allows respondents to complete the survey remotely using a web-based interface. In the HUG surveys, data collection was carried out using Google Forms and Microsoft Forms.

Method	Period	Number of Participants	Description	Demo-graphics	Geographic Scope
Qualitative	Oct 2023–Jan 2025	8 mental health specialists assessing 318 project participants	Practical observations ¹⁰ during individual and group sessions among <i>Better You&Me</i> project participants	291F, 27M; 16–75 y.o.	National

The surveys were distributed through the HUG Volunteering Centre and social media platforms targeting Ukrainians who arrived in Sweden after February 24, 2022.

Due to the use of consistent dissemination channels, primarily HUG’s support services and social media platforms with overlapping audiences, it is likely that some individuals participated in more than one survey round. Notably, participation between May 2024 and January 2025 surveys was limited to the participants of the *Better You&Me* project.

Across all methods, the vast majority of participants, over 95%, were Ukrainian TPD holders. The remaining participants held other statuses, such as asylum seekers, family reunification permits, or short-term residence, but identified themselves as displaced. The majority of respondents identified as female, consistently representing over 85% of participants across all rounds of data collection. Over 80% of respondents were between 18 and 64 years old.

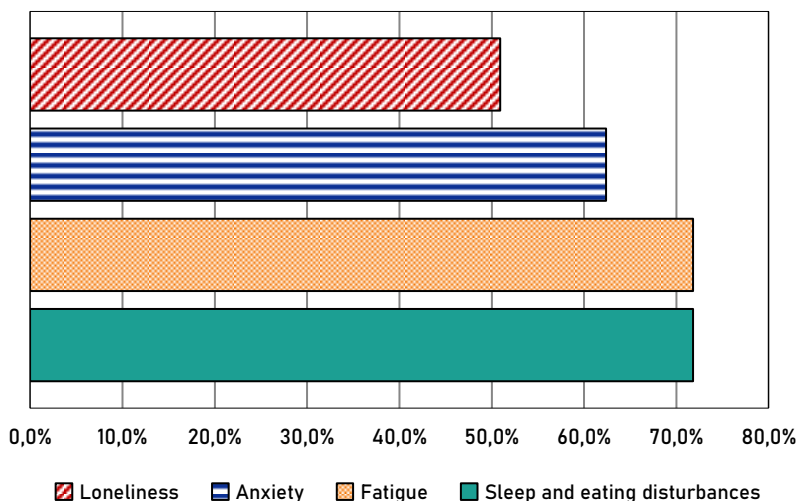
Results

Mental Health Risks and Support Needs Among Displaced Ukrainians in Sweden

Initial findings suggest that many respondents experience psychological distress. The Computer-assisted Web Interviewing (CAWI) survey conducted by HUG among 330 Ukrainian TPD holders (August 2023) in Västra Götaland identified persistent fatigue, anxiety, loneliness and reduced ability to function in daily life.

¹⁰ Practical observations refer to the structured and systematic tracking of changes in mental health and overall well-being among project participants.

Figure 1. Self-Reported Mental Health Challenges Among Ukrainian TPD Holders in Västra Götaland (August 2023)



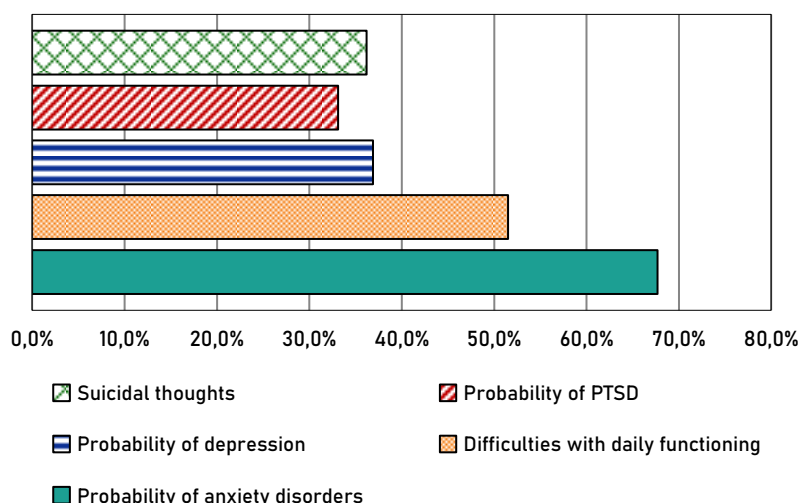
According to the next survey, conducted among 280 Ukrainian TPD holders (January–February 2024) in Västra Götaland, 41.1% rated their mental health as poor or worse than moderate.

Despite the significant need for mental health support among Ukrainian TPD holders, only a small proportion of respondents reported receiving appropriate care. In August 2023, 34.2% of respondents were ready to seek help, and 26.7% acknowledged the need but were not ready to act. In January–February 2024, 72.5% reported not receiving any psychological assistance since displacement, and only 0.9% had received professional support in Sweden. Notable, is that 11.4% reported that they are receiving help from volunteer initiatives, which may indicate a higher level of trust to NGOs compared to formal services.

Across all surveys, results indicate that many participants faced barriers to seeking help, including language barriers, lack of time, money, trust, and limited understanding of how the healthcare system works in Sweden. Many avoided reaching out due to limited awareness about mental health or mental health stigma. Some were afraid of being seen as emotionally unstable, weak, or incapable of coping. Others feared that disclosing mental health struggles could affect their future employment, education opportunities, or raise concerns about their parenting.

The next survey was conducted between May 2024 and January 2025 among 130 *Better You&Me* project participants. The results further highlight the long-term nature of mental health needs and widespread psychological vulnerability, including probable anxiety disorders, difficulties with functioning in day-to-day life, as well as depressive symptoms (Figure 2). Most alarming, however, was that 36.2% of respondents reported experiencing suicidal ideation.

Figure 2. Self-Reported Mental Health Challenges Among *Better You&Me* participants (May 2024–January 2025)



The findings from the *Better You&Me* project support the hypothesis that Ukrainian TPD holders in Sweden may experience complex, multi-layered trauma, shaped by war and displacement, integration stress and uncertainty. Some symptoms (e.g. anxiety, existential issues) tend to emerge early, while others (depressive symptoms, burnout, suicidality) may intensify later, during different stages of integration, possibly months, years, or even decades after arrival.

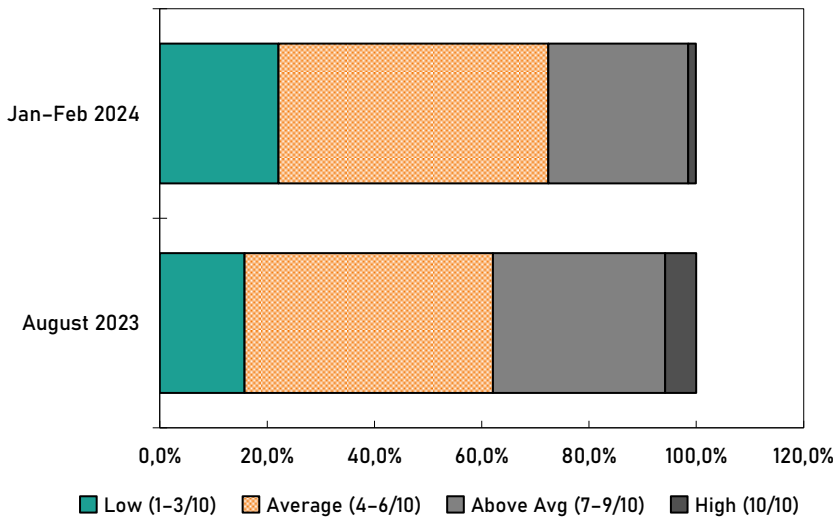
Supported by the practitioners' observations, conducted between October 2023 and January 2025 among 318 project participants, these findings may also suggest a growing need for sustained mental health support, provided through public services, early identification of risks, psychoeducation, and clear guidance on accessible pathways to care.

The Interconnection Between Mental Health and Integration

According to the survey conducted in January to February 2024, a modest majority of respondents (65%) stated that good mental health can support integration. Many participants reported that stress, anxiety, and low confidence often interfered with learning, professional development, and broader integration efforts.

Notably, in both surveys (August 2023; January–February 2024), conducted among Ukrainian TPD holders in Västra Götaland, participants rated their level of integration as moderate, with a decline in February, as illustrated in the Figure 3.¹¹ These shifts may reflect growing frustration related to the integration barriers such as uncertainty about legal status, limited access to language learning, and difficulties entering the labour market.

Figure 3. Self-Reported Integration Rate Among Ukrainian TPD Holders in Västra Götaland region. Comparison of two CAWI surveys (August 2023 and January–February 2024)



Another aspect of the research involved identifying the integration barriers Ukrainian TPD holders experience in Sweden. In January–February 2024 respondents identified the most common barriers: lack of Swedish language

¹¹ Integration levels are based on self-reported ratings from 1 to 10. The chart groups these into four categories.

skills (65.4%), limited English proficiency (28.9%), no BankID¹² access (57.9%), job search difficulties (54.3%), financial strain (49.3%), limited access to health-care (47.9%), and social isolation (28.6%). At the time of the survey, Ukrainians were ineligible for personal numbers and Swedish for Immigrants (SFI)¹³ courses.

Practitioners' observations, conducted during the project (October 2023–January 2025) among project participants, indicate that overall legal uncertainty and the temporary nature of the TPD acts both as an integration barrier and as a factor negatively affecting mental health. As the TPD is being extended on a yearly basis without offering pathways to more stable residency, Ukrainians are unable to plan their life more than one year ahead. The uncertainty of what comes next may intensify anxiety and contribute to chronic stress, especially among those who cannot return to Ukraine due to the destruction or occupation of their homes.

Limited access to the labour market and underemployment among TPD holders also emerged as both a barrier to integration and a factor affecting mental health. Between January and February 2024, over half of respondents rated their access to the labour market in Sweden as limited, despite that more than 68.9% held a Master's degree or higher. Among those employed, only 30.6% were working within their field.

The findings suggest a two-way connection between mental health and integration. Poor mental health can limit learning, employment, and social engagement, while integration barriers often increase stress, insecurity, and emotional strain. Within this context, the central needs expressed by Ukrainian participants are emerging as safety and stability, including secure legal status, employment in one's field, financial security, the ability to exercise rights, host-language proficiency, and access to independent housing.

¹² BankID is a Swedish national e-identification system used for secure access to a wide range of digital services, including banking, healthcare, tax services, public administration, and shopping. It is essential for verifying identity online and is widely used by both public institutions and private companies. BankID access requires a personal number.

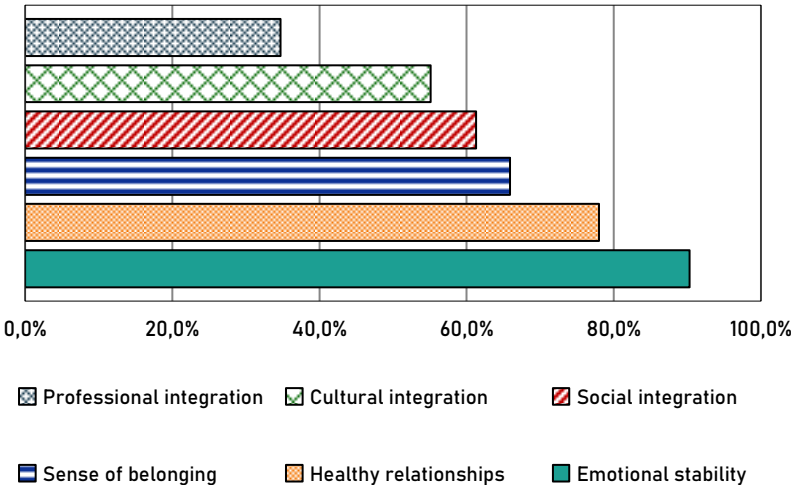
¹³ SFI is a state-funded language education programme that provides newly arrived adults with basic Swedish language skills.

Addressing Mental Health and Integration Needs Through Targeted Support

Over 15 months of implementation, the *Better You&Me* programme reached 443 Ukrainian TPD holders in Sweden, including 318 adults and 125 children. Participant engagement remained steady throughout the implementation period. On average, 60 to 80 participants took part in activities each month. In total, 172 participants attended individual sessions, while 361 engaged in group activities.

The self-assessment survey conducted between November 2024 and January 2025 among 49 project participants, shows that over 90% of respondents reported an improvement in their well-being and over 60% reported improvement in the integration outcomes. 98% stated that they would recommend the programme to others.

Figure 4. Self-Reported Improvements in Mental Health and Integration Outcomes Among *Better You&Me* participants (October 2024–January 2025)



The *Better You&Me* experience confirms that tailored support can enhance both mental health and integration outcomes. Its effectiveness, reflected in sustained engagement and positive participant feedback, can be attributed to the programme's guiding principles – cultural sensitivity, orientation toward

a trauma-informed approach, and recovery. Additionally, its comprehensive design, offering multiple levels of accessible support, allowed participants to engage in ways that met their individual needs and capacities.

The findings also highlight the central role of NGOs in delivering accessible, trusted support. In order to continue to fill this role effectively, NGOs require stable funding and institutional partnerships.

The methodology developed for the *Better You&Me* programme,¹⁴ offers a flexible, replicable model for additional implementations, with appropriate adaptation. It can serve diverse target groups and contribute to broader mental health and integration support programmes.

Conclusions and Recommendations

Based on these findings, we can conclude that some mental health and integration needs among Ukrainian TPD holders remain unmet. Lack of linguistically and culturally appropriate services, addressing these needs, temporary legal status, underemployment,¹⁵ stigma, and limited awareness about mental health, all create obstacles.

Given these findings, the following steps should be made to address identified gaps and incorporate mental health and integration support into broader policy frameworks for displaced populations, particularly for Ukrainian TPD holders.

1. The Swedish Migration Agency (*Migrationsverket*), The Swedish Public Employment Service (*Arbetsförmedlingen*), and healthcare providers on regional and municipal levels) are **encouraged to build partnerships with NGOs, thereby expanding service outreach and improving responses to the needs of displaced communities**. This is especially relevant since NGOs are often the most trusted and accessible sources of support. They operate close to communities, speak their language, and understand their cultural context.

¹⁴ For a detailed description of the methodology developed for the *Better You&Me* programme, see the full project report (HUG, 2025).

¹⁵ Underemployment in this context reflects the gap between Ukrainian TPD holders' education levels, skills, and experience, and the actual job roles they are able to access in Sweden.

To ensure meaningful and sustainable collaboration, NGOs should be included in policy dialogues and supported through accessible, outcome-oriented funding with simplified administration, as they often have limited capacity to manage complex administrative tasks. Their role as **equal partners in integration efforts** must be recognized and strengthened through long-term cooperation with policy makers and capacity building activities.

2. Both displaced populations and their host society will benefit if the Asylum, Migration and Integration Fund (AMIF), European Social Fund Plus (ESF+), county administrative boards (*länsstyrelser*), and municipalities (*kommuner*) **expand their support for mental health care programmes tailored to the specific needs of these communities**. These programmes should meet the following requirements: provide short-, medium-, and long-term support at different stages of trauma recovery and integration; be grounded in trauma-informed, culturally sensitive, and recovery-oriented approaches; include both individual and group interventions; and be oriented to different genders and age groups.
3. Barriers such as limited mental health literacy and stigma continue to discourage many displaced individuals from seeking support. The Swedish Public Health Agency (*Folkhälsomyndigheten*), the National Board of Health and Welfare (*Socialstyrelsen*), and healthcare providers on regional and municipal levels are **encouraged to organize public awareness campaigns for displaced communities focused on mental health**. These campaigns should provide clear, practical information about available mental health support: what services are available nearby, what kind of help is offered, and how to access it.
4. The Swedish Migration Agency (*Migrationsverket*), the Swedish National Agency for Education (*Skolverket*), and the Swedish Public Employment Service (*Arbetsförmedlingen*) should **ensure that mental health support is incorporated into education and integration programmes for Ukrainian TPD holders and other displaced populations**. Educational settings (*SFI, Komvux, Etableringsprogrammet*) are often the first and most stable point of contact with the host society. To make use of this opportunity, curricula at all levels may include basic psychoeducational content tailored to different age groups and delivered in a culturally sensitive way.

5. Since psychological distress may limit labour market engagement, the Swedish Public Employment Service (*Arbetsförmedlingen*) and relevant municipal authorities could **implement psychoeducation and basic mental health support components in the employment programmes**, while also encouraging employers to create safe and supportive workspaces for displaced communities.
6. The Swedish Migration Agency (*Migrationsverket*), the Swedish Public Employment Service (*Arbetsförmedlingen*), and Swedish municipalities (*kommuner*) should **introduce trauma-sensitive screening at early contact points, such as language schools, employment services, and social support centres, and equip frontline professionals with comprehensive, hands-on training**. Training should prepare service providers to use trauma-informed, culturally responsive approaches, and equip them with tools for supportive communication and early referral. NGOs, particularly those applying the approaches outlined above, are well-positioned to deliver these trainings and provide professionals with appropriate screening materials, adapted to participants' native languages.
7. Swedish and EU decision-makers should acknowledge that as TPD offers short-term status without a clear path to permanence, for many Ukrainians it can cause uncertainty that worsens mental health and disrupts integration. The legal frameworks should therefore **support long-term inclusion of vulnerable groups**.

The recommendations above reflect the emerging consensus that mental health support must be part of long-term integration efforts. They provide practical steps that institutions at all levels can take to address the mental health needs of displaced populations, including and beyond the Ukrainian communities. When people feel heard, understood, seen, when they are informed about trauma and recovery, and when they know how and where to access help without fear, the healing process begins. Where there is recovery, there is the possibility to contribute.

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conclusions and policy recommendations.



SWEDISH GOVERNMENT
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