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Women’s experience in accessing psychological support



ANALYTICAL REPORT ON SURVEY RESULTS

570 respondents

Key barriers • experience of receiving support • continuity • future demand

About the study

The study was conducted by the UA Mental Help Charitable Foundation with the support of the Askold and Dir Fund, administered by ISAR Ednannia within the project “Strong Civil Society of Ukraine – a Driver towards Reforms and Democracy”, funded by Norway and Sweden. The content of this analytical report is the responsibility of the UA Mental Help Foundation and does not reflect the views of the Governments of Norway, Sweden or ISAR Ednannia.



The UA Mental Help Charitable Foundation works in the field of psychological and psychosocial support and develops analytical tools to better understand needs, barriers to access and support outcomes.

Representatives of the following contributed to the study: the “1325 Kyiv” Coalition, the NGO “Gender Creative Space”, the NGO “HARMONIA.UA”, the Gender Equality Department of the Kyiv City State Administration, the Kyiv Stress Resilience Center, the NGO “Sisterhood in Action”, and the “Center for Gender Education” initiative group of Ivan Puluj Ternopil National Technical University.

This study has a practical purpose: to show how women seek psychological support, what makes it harder to access, and what should be taken into account when planning MHPSS programs.

The study in one slide

95.2%
felt a need for psychological support

79.6%
say cost significantly or critically limits access

82.0%
trusted the specialist and felt safe

91.9%
are ready to seek support in the future

Main conclusion

The problem is not a lack of willingness to seek help. The key gap lies in the accessibility, duration and financial continuity of support.

For the surveyed group, community and charitable programs are in fact one of the main channels of access to psychological support.

Who these data describe

N=570
core socio-demographic block

390–519
responses in the substantive blocks

25–44
years — the core of the age structure

20.0%
were abroad at the time of the survey

Important for interpretation

The online format and the way respondents were recruited mean that the results describe the surveyed group specifically and are not a representative estimate for all women in Ukraine.

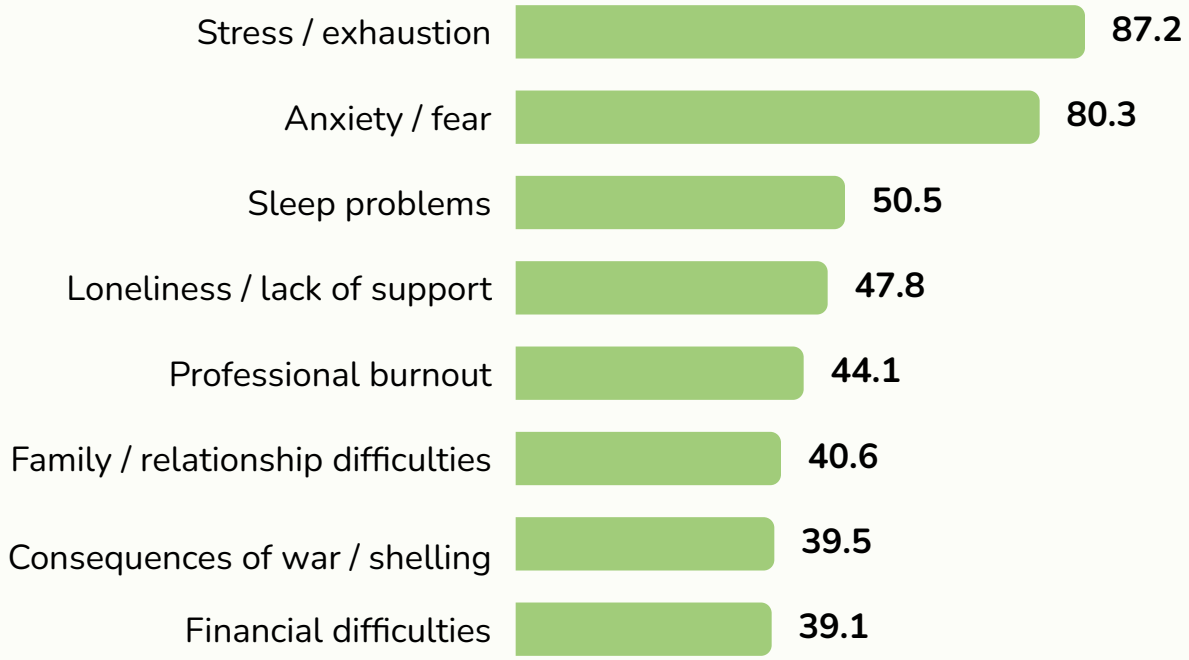
Bivariate analysis

No pronounced socio-demographic differences that would change the main conclusions were found. The focus is therefore on the overall structure of needs and barriers.

The need is almost universal — and complex

95.2%
answered “yes” or “rather yes” about a need in the past 12 months

The need arises at the intersection of war, economic pressure, family burdens, professional exhaustion and a lack of social support.



From difficulties to support: the path is often delayed

32.5%
recognized the need more than six months later

77.7%
sought psychological support

62.1%
received first support within 4 weeks

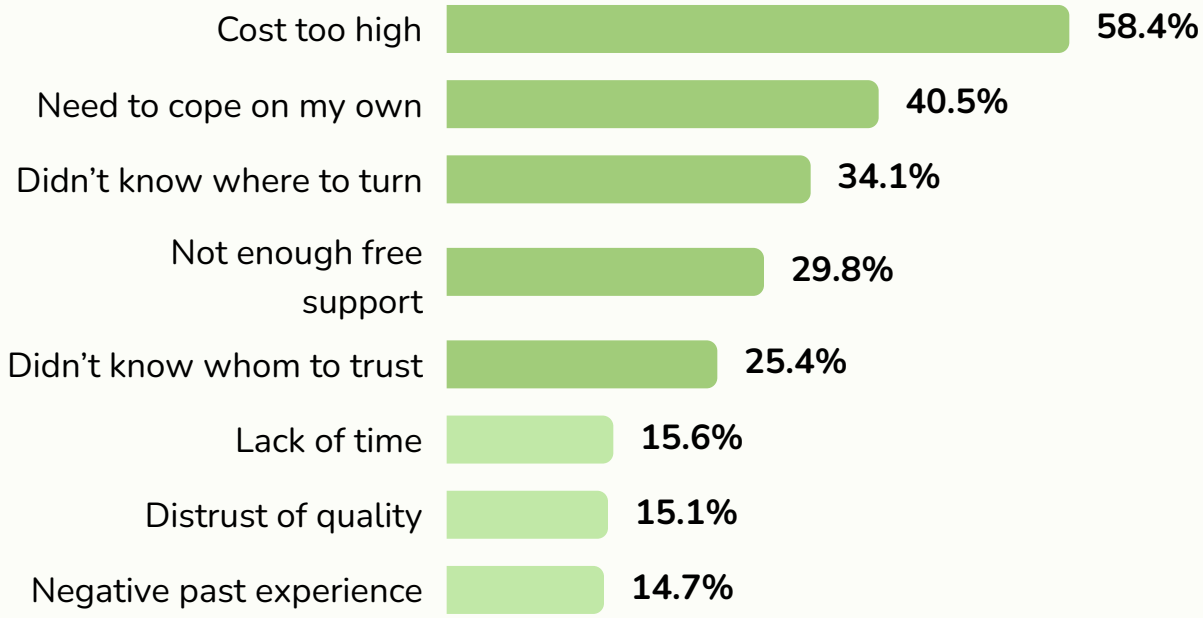
73.1%
continued support after the first contact

18.3% did not seek help even though they needed it.

This is “unactivated need”: it creates no queues for services, but reflects real unmet demand.



Barriers to access: from cost to trust



Main barriers to accessing psychological support, % (multiple choice, N=449)

> **No single intervention will remove all barriers: even a completely free service may remain inaccessible if it is hard to find out about or the provider is not trusted.**

Four groups of barriers

Economic
high cost and shortage of free places

Navigational
not knowing where to turn or whom to trust

Internal and sociocultural
belief that one should cope alone,
shame about seeking help

Organizational
lack of time, childcare, schedule, format,
logistics

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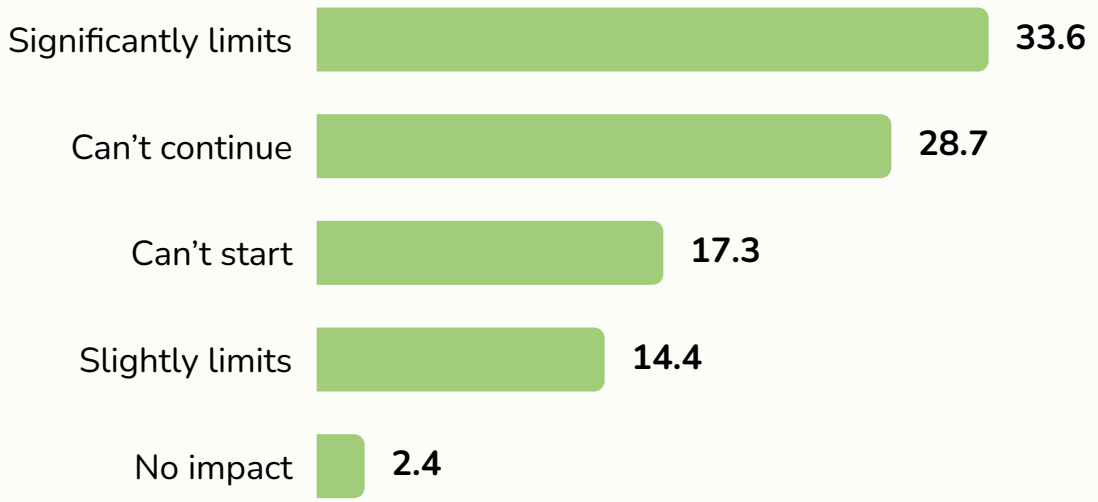
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Affordability — a systemic constraint

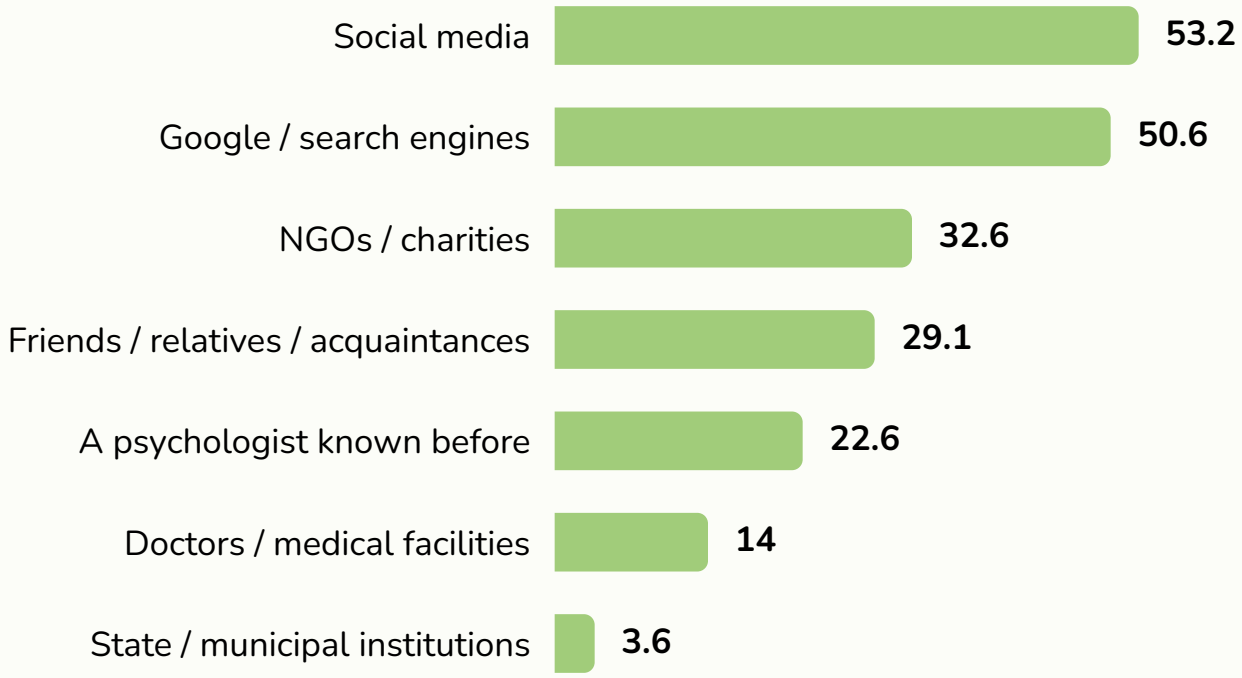
58.4%
named the high cost of services as a key barrier

79.6%
describe cost as a significant or critical constraint on access



The financial barrier operates along the entire pathway: it prevents people from starting, shortens the duration and creates a gap after a free program ends.

Help-seeking happens mostly on one’s own



34.1%
named not knowing where to turn as a barrier to access

56.2%
had to re-explain the same situation to different specialists at least once

Conclusion: navigation is part of the service, not an add-on to it.

Online is the core infrastructure of access

80.0%
received individual online counseling

64.5%
received support from community or charitable organizations

88.7%
consider individual online the most convenient format for the future

41.7%
received support from a private psychologist or center

What this means

Online counseling should be seen as the core of scalable programs, while keeping offline and blended pathways for those who need them.

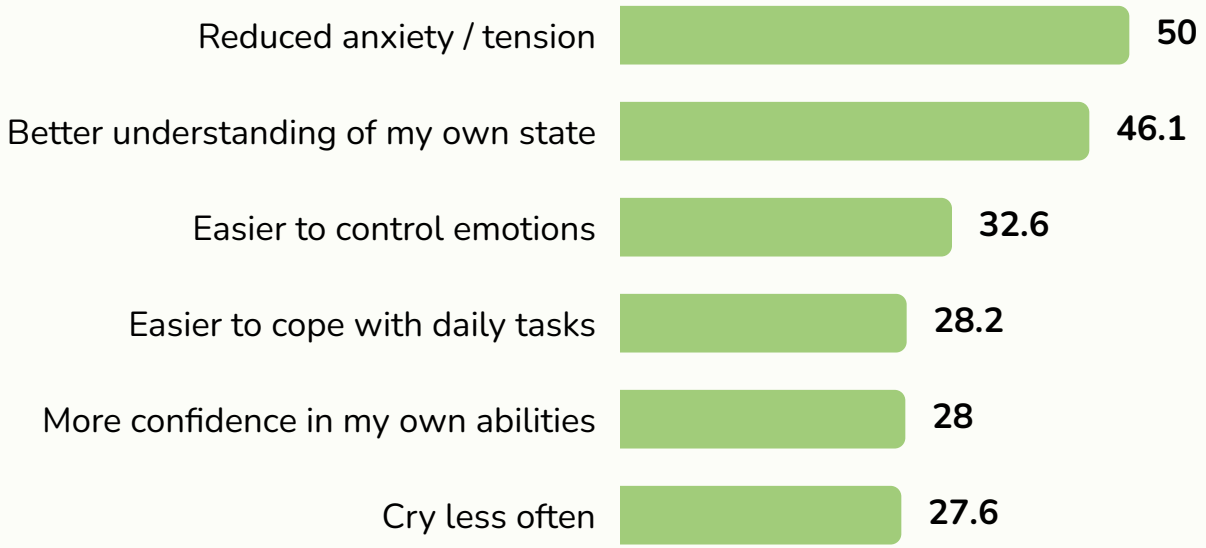
> **Within this sample, the community sector is a key access channel.**



Support is mostly perceived as safe and helpful

82.0%
fully or mostly trusted the specialist and felt safe

At the same time
14.1% noticed no significant change, 2.1% reported a worsening of their condition.



This argues for regular progress monitoring, the option to change specialist or format and clear referral protocols.

The main structural risk is a “support cut-off”

A person has already overcome the barrier to seeking help, found a specialist and started support — but loses access before the need is met.

54.4%
stopped while still in need because free sessions ended

33.9%
due to switching to paid / too expensive support

30.8%
due to the end of a project or program

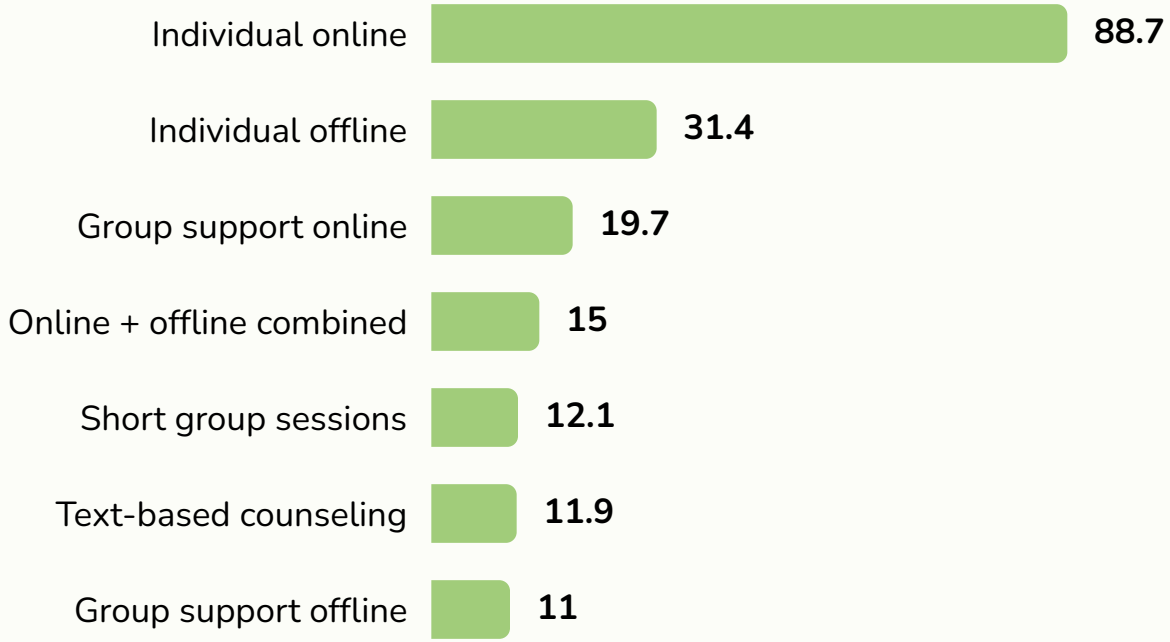
> After support ended, 26.2% wanted to continue but could not afford it financially; another 12.0% wanted to continue but the program had ended.



Demand persists despite barriers

91.9%
are ready or rather ready to seek support in the future

Barriers to access should not be confused with a lack of demand or a negative attitude toward psychological support.



KEY MESSAGE

Women are ready to seek psychological support.

The system must be ready not only to open the door, but also not to cut support off midway.

Accessibility = price + duration + navigation + quality + convenient format



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