

LET'S TALK MENTAL HEALTH

NEWSLETTER | JAN - JUL 2023

PAKISTAN'S MENTAL HEALTH CRISIS

In low- and middle-income countries like Pakistan, mental health and psychosocial support is often not given enough attention due to insufficient resources and limited awareness of the issue.

Adolescence is a critical phase characterized by rapid physical, emotional, and cognitive changes. Unfortunately, this transitional period often exposes young individuals to various stressors, including academic pressures, societal expectations, and personal identity issues. The stigma surrounding mental health in the country has historically discouraged open discussions, hindering timely interventions.

It is crucial to mobilize, strengthen, and empower communities to support adolescents and work collaboratively to ensure early intervention, reduction in stigma, and increased awareness. Adopting community-based approaches can also help overcome the barriers to accessing mental health care by involving trusted community members who can provide support to those who need it.

Khyber Pakhtunkhwa

7 Districts: 48 Union Councils

Upper Chitral, Lower Chitral, Tank, Dera Ismail Khan, Charsadda, Peshawar and Lower Kohistan

Balochistan

9 Districts: 60 Union Councils

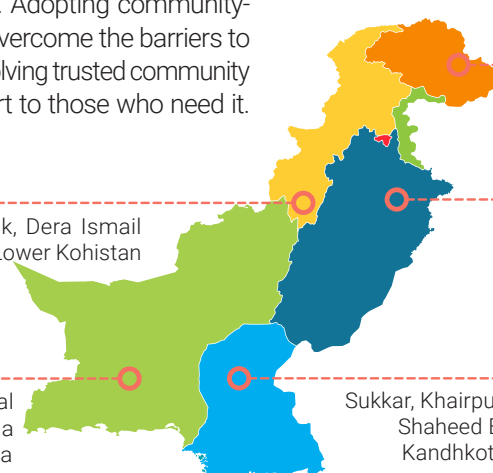
Naseerabad, Nushki, Quetta, Jhal Magsi, Jafferabad, Chaman, Killa Saifullah, Sobhupur and Lasbela

SHAMS -

Providing mental health and psychosocial support through strong community support systems

UNICEF Pakistan in collaboration with School of Leadership Foundation has launched SHAMS (Self-care and Hope through Adolescent-led Mental Health and Psychosocial Support), a programme that aims to equip adolescents and their caregivers with much needed information on mental health and psychosocial needs to establish community-based support systems to help young people with their mental health.

The program is being implemented in 34 districts across the country, including those affected by catastrophic floods last year.



Gilgit-Baltistan

1 Districts: 3 Union Councils

Ghizer

Punjab

5 Districts: 48 Union Councils

Rajanpur, Dera Ghazi Khan, Kasur, Rawalpindi and Multan

Sindh

12 Districts: 63 Union Councils

Sukkar, Khairpur, Jacobabad, Umerkot, Larkana, Dadu, Shaheed Benazirabad, Sanghar, Naushero Feroz, Kandhkot, Qambar Shahad Kot and Mirpur Khas

This is the pilot phase of the programme. In the second phase, our mission is to expand its reach to more districts across the country, touching the lives of even more individuals. Building on the valuable insights gained from the field, we're eager to include additional themes like child marriage and gender-based violence. These connections have shed light on the significant impact on mental health, and we are committed to addressing these issues with care and compassion.

PROGRAMME GOALS AND HOW WE PLAN TO ACHIEVE THEM:

Programme Goal	How?
#MentalHealth4All: Adolescent-led and caregiver mental health awareness sessions	Conducting Mental Health Awareness sessions, engaging in open conversations on Stigma Reduction, and guiding participants on practicing Positive Self-Care.
#InThisTogether: Digital Media Engagement Campaign	Harnessing the power of creativity and influential voices to spread awareness on mental health.
#ISMF: I Support My Friends	Providing knowledge and skills to adolescents to help their friends in times of distress.

WHAT HAVE WE DONE SO FAR?

01 Knowledge, Attitudes, and Practices (KAP) Survey:

To ensure program relevance, a Knowledge, Attitudes, and Practices Survey was conducted between October 2022 and January 2023. This aimed to understand mental health and psychosocial support (MHPSS) perceptions, knowledge, and care-seeking practices among adolescents and caregivers, as well as available support structures.

The survey was conducted with 1,100 adolescents and 1,000 caregivers from 34 districts.

KEY FINDINGS

In a country where research on mental health remains limited, we are determined to make a difference. We conducted the first-of-its-kind survey aimed at gaining insights about the perception of adolescents on mental health. Join us as we listen to their voices and unravel the perceptions of mental health and its impact on young minds.

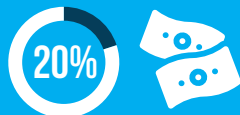
KEY FINDINGS | ADOLESCENTS

TOP 3 SOURCES OF STRESS

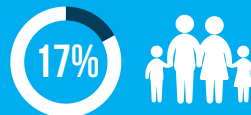
1 School-related challenge



2 Financial/money-related worries

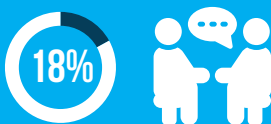


3 Family environment



TOP 3 COPING MECHANISMS

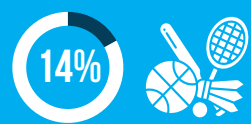
1 Talking to someone



2 Sleeping



3 Playing Sports



TOP 3 SOURCES OF SUPPORT

1 Parents



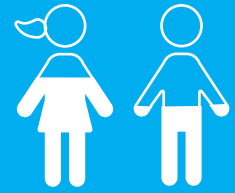
2 Friends/Peers



3 Siblings



CAREGIVERS GENDER



FEMALE
529
61.1%

MALE
506
48.8%

AGE GROUP



Number of Respondents
104 324

Percentage
10% 31.3%



Number of Respondents
373 235

Percentage
36% 22.7%

TOP 3 SUPPORT SERVICES AVAILABLE TO ADOLESCENTS

1 Local health facility



2 A hospital in the city



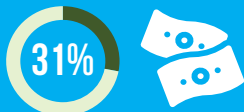
3 School counsellor



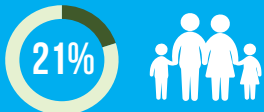
KEY FINDINGS | CAREGIVERS

TOP 3 SOURCES OF STRESS

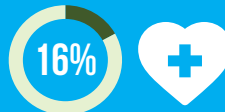
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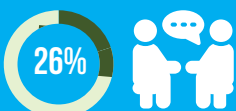


3 Health-related problems



TOP 5 COPING MECHANISMS

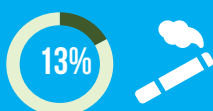
1 Talking to someone



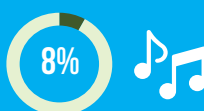
2 Sleeping



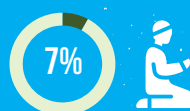
3 Smoking



4 Listening to music



5 Praying



TOP 3 SOURCES OF SUPPORT

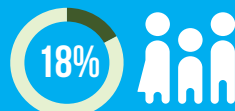
1 Friends/Peers



2 Parents



3 Siblings



TOP 3 SUPPORT SERVICES AVAILABLE TO CAREGIVERS

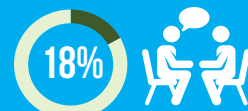
1 Local health facility



2 A hospital in the city



3 School counsellor



There is a lot of pressure on children due to academic expectations. There is a great deal of competition, and they may develop feelings of inferiority when they see other children with nicer clothes and possessions, which their parents may not be able to afford. This can be heartbreaking for the kids."

-Noor Sahib, 35, Mother, Rawalpindi



Focus Group Discussions (FGDs):

Under the KAP survey, we also conducted a series of Focus Group Discussions (FGD) to understand the attendees' perspectives on mental health issues. Through these discussions, we gained valuable insights into the common misconceptions and stigmas around mental health, the level of awareness and access to resources, and the barriers to seeking help.

The discussions highlighted the need to continue the conversation and raise awareness about mental health in the community.



No mental health support facilitation in our area. For this purpose, we move to Maulana and take TAWEEZ.

- Nadia, 17, Female, Jacobabad, Sindh

21 focus group discussions with 210 participants from 31 districts were carried out.



KEY FINDINGS | ADOLESCENTS

Key sources of stress as identified by adolescents:

<p>1 Academic pressure</p>	<p>2 Financial instability</p>	<p>3 Domestic Violence</p>
<p>4 Punishments</p>	<p>5 Family Environment</p>	<p>6 Friendship-Related Concerns</p>

- Adolescents were found to have limited awareness about mental health, showing a need for greater education and awareness.
- While they showed openness to seeking and offering support, they lacked the knowledge of appropriate ways to do so effectively.
- Caregivers, on the other hand, were found to be unaware of the significant impact that family environment and academic pressure can have on mental health.

KEY FINDINGS | CAREGIVERS



- Caregivers encounter a significant knowledge gap when it comes to providing support to distressed adolescents, and the lack of community-level assistance further exacerbates the issue.
- Stigma surrounding mental health remains a barrier to seeking care, but trusted sources such as religious representatives and family members are seen as potential support systems.
- As coping strategies, caregivers often resort to physical activity or isolation, but the mental health repercussions of recent floods have been intensified due to the absence of accessible support.

CONCLUSION

The insights gathered from the focus group discussions (FGDs) and knowledge, attitudes, and practices (KAP) survey will guide us in creating training materials for awareness sessions. These materials will be instrumental in establishing support mechanisms, fostering community networks, and promoting behaviors that actively challenge mental health stigma. By addressing knowledge gaps and learning needs, our objective is to foster a more inclusive and comprehensive understanding of mental health and psychosocial support.

02 I Support My Friends:

I Support My Friends is an innovative programme dedicated to promoting Psychological First Aid among adolescents and empowering them to provide support to their friends during difficult times, under the mentorship and guidance of trusted adults. Through interactive workshops and resources, I Support My Friends equips adolescents with practical skills and knowledge to be effective allies and advocates for mental wellbeing within their social circles.

SoLF organized a three-day capacity building workshop with 27 participants from all regions. The primary goal was to develop a pool of facilitators who would be responsible for delivering district-level training workshops for teachers under this component.



"I really like the concept of peer-to-peer Psychological First Aid, which consists of three remarkable principles. The first principle, "look," assists us in identifying friends in our surroundings who may require our support. The second principle, "listen," involves actively listening to them and understanding their specific needs for assistance. Finally, the last principle, "link," focuses on connecting them with a professional or a trusted adult, if needed, who could provide the necessary help."

-Amir Zaman, 24, Male
Chaman, Balochistan

03 Training of Facilitators for MHPSS sessions:

Under the SHAMS programme, we are conducting mental health sessions with adolescents and caregivers in 34 districts of Pakistan. To train a pool of facilitators who will lead these MHPSS training sessions, we conducted two 3-day capacity building workshops, gathering 61 participants from all regions.

The workshop content focused on imparting useful knowledge to them on reducing stigma, encouraging care-seeking behaviors, and adoption of positive self-care practices which they can stress upon during their MHPSS awareness sessions at the district level with adolescents and caregivers.



Participant Distribution:



	Female	Male	Total
Sindh	03	10	13
Balochistan	01	04	05
Punjab	-	03	03
Khyber Pakhtunkwa	01	04	05
Gilgit-Baltistan	01	-	01
Total Participants	06	21	27

Participant Distribution:



	Female	Male	Total
Sindh	06	11	17
Balochistan	04	12	16
Punjab	05	04	09
Khyber Pakhtunkwa	06	11	17
Gilgit-Baltistan	02	-	02
Total Participants	23	38	61



KEY ACTIVITIES:

01 We developed a content package for training of facilitators for MPHSS awareness sessions. This package was also field-tested with 60 adolescents, 34 caregivers, 37 field-staff, and 3 lead trainers across Pakistan.

FEEDBACK ON THE CONTENT PACKAGE



Participants found the concepts and information in the content package easy to understand.



Participants believed the information and concepts within the content package will be helpful in reducing stigma associated with mental health and psychosocial support and promoting self-care practices.



Participants agreed the content package contained information and concepts that were important for them to learn about mental health and psychosocial support.



Participants agreed the activities included in the content package will encourage caregivers and adolescents to play an active role in creating supportive communities.

02 We organized two Training of Trainer (ToT) workshops (one in Karachi and one in Islamabad) with 61 participants for the awareness-raising component.

FEEDBACK ON THE TRAINER WORKSHOP



Participants agreed the information shared in the workshop was clear and easy to understand.



Participants shared they felt confident in their ability to comprehend the program's objectives and understand their role as a trainer.



Participants agreed the information they received was useful for their work.



Participants felt confident in their ability to conduct district level awareness sessions on mental health and psychosocial support with adolescents and caregivers.

03 We conducted a 3-day Training of Trainers (ToT) for I Support My Friends (ISMF) component in Karachi.

FEEDBACK ON THE TRAINERS WORKSHOP



Participants agreed that the information was clear and easy to understand.



Participants were confident they could identify the steps to be taken to implement activities in the I Support My Friends-training with children and adolescents, by using the Training Manual as a guide.



Participants felt they were able to list key ethical principles and mechanisms to ensure that I Support My Friends is in the best interests of the children and adolescents.



Participants shared they felt confident in their ability to describe good practice for implementing key activities, including aspects to be adapted to the context.





Get in Touch:

To find out more about the programme and our activities, visit our social media channels:

Instagram | Twitter | Facebook: @solforgpk

Have any thoughts or suggestions on the programme? Write to us at info@solf.org.pk.

