Mental Health and Psychosocial Support Programmes in Yemen: GBV survivors significantly improve after 4 psychotherapy sessions.

Since 2018, UNFPA continues to provide specialized clinical mental health care services to GBV survivors in Yemen.

To understand the impact of these specialized services, in 2021, UNFPA introduced technical evaluation tools to measure change in terms of general well-being and severity of psychiatric symptoms (depression and anxiety) in people referred and treated at UNFPA-supported specialized mental health facilities.

From January to June 2021, 317 female survivors of violence, corresponding to the pilot criteria, were screened with the identified psychometric tools. On average, each of these women displayed, on admission, a very poor state of general well-being, a moderately severe state of depression, and a moderate state of anxiety, concurrently.

From the total sample of 317 clients, within a period of 6 months, 193 women managed to attend at least 4 psychotherapy sessions in person or by tele-counseling. After receiving the four psychotherapy sessions, the clients took again the psychometric tests.

The results indicated that on average, both anxiety and depression symptoms decreased in intensity from moderate to mild and from moderately severe to moderate respectively. Moreover, a significant positive improvement in terms of general well-being was detected (17% vs. 10% cut-off for significant improvement).

From the total sample of 317 women, 36 dropped out of the program. Out of the 36, 16 women were successfully reached by phone after 4-6 weeks they dropped out and agreed to take the tests for the second time, as control group.

In these women, both anxiety and depression symptoms generally increased in intensity from the baselines. Moreover, in terms of general well-being, the women who dropped out of the program did not benefit of a significant positive change in terms of general well-being as those who completed the 4 sessions cycle.

This data seems to indicate that GBV survivors who access and comply with specialized mental health services, significantly improve over time in terms of general Well-Being and severity of Depression and Generalized Anxiety symptoms.

Furthermore, GBV survivors that comply with a recommended specialized mental health treatment plan score significantly better in terms of general Well-Being and severity of Depression and Generalized Anxiety symptoms compared to those survivors that early drop out services.
PROGRAMME HIGHLIGHTS January – March 2021

Specialized Mental Health and Psychosocial Support Services

In the second quarter of 2021, UNFPA continued its support to four local partners in running eight centers providing specialized mental health and psychosocial support services in Aden, Ibb, Hadramaut, Hajjah, Sana’a and Taizz Governorates.

Psychiatrists and psychologists through this network assisted patients with psychiatric evaluation, psychotropic drugs, individual and group psychotherapy, and day and night emergency care.

For the period April to June 2021:

- 17,819 people received in-person multi-level specialized psychiatric and psychological support services
- 9,959 people received specialized psychological and non-specialized support through the toll-free hotline

Psychosocial Services for Women and Girls

Between April and June 2021, women and girls safely accessed quality, survivor-centered psychosocial support services focused on healing, empowerment and recovery through 41 safe spaces and 8 safe shelters being supported by UNFPA.

Focused, non-specialized services and community and family support are critical for reducing and mitigating harmful psychological effects of stressful and traumatic experiences in men, women, boys and girls who are in need of psychosocial support but do not necessarily require specialized care.

Services provided at the safe spaces and shelters included case management, psychological first aid, counselling, group-based psychosocial support sessions, psycho-education, economic empowerment, and life-skills.

From January to March 2021:

- 56,150 people received in person non-specialized services at the safe spaces
- 608 women and girls assisted with psychosocial support services at safe shelters
Psychosocial Support through Mobile Teams and Outreach Activities

Nearly 4 million Yemenis are internally displaced and live in internally displaced settlements or within host communities. Precarious living conditions, economic crisis and multiple layers of protracted hardship put people’s well-being and coping mechanisms further at risk. Outreach activities offer opportunities to access women and girls whose movement may be restricted.

Mobile teams have been established in 14 governorates to reach remote areas and IDP settlements. Outreach response builds upon existing women groups and support networks.

Key activities include home visits and home-based sessions, engagement with community structures, religious and community leaders, and the development of more informal safe spaces around the main physical safe spaces.

Psychological first aid, referral and awareness to promote well-being of displaced persons living in camps are provided through the mobile teams.

For the period April to June 2021:

13,700 people were assisted with psychosocial support services through mobile teams

ECOSOC Humanitarian Segment Side Event: A multisectorial approach towards MHPSS in humanitarian settings; needs, achievements and gaps.

Since 1998, the ECOSOC Humanitarian Affairs Segment (HAS) has been an essential platform for discussing the activities and issues related to strengthening the coordination and effectiveness of the humanitarian assistance of the United Nations.

This year, on 22 June, UNFPA, together with UNICEF, UNHCR, WHO and the Ministry of Foreign Affairs of the Netherlands, contributed to the side event convened on the margins of the Humanitarian Affairs Segment: A multisectorial approach towards mental health and psychosocial support in humanitarian settings; needs, achievements and gaps.
In the last decade, country-level MHPSS working groups (WGs) were established in many humanitarian emergencies, as a technical cross-sectoral space to coordinate MHPSS service provision, facilitate MHPSS assessments, conduct service mappings, support inter-agency capacity building, develop country-level action plans and advocate for MHPSS services within humanitarian relief efforts.

In January 2020, there were MHPSS WGs in 22 countries; in December 2020, this number had grown to 52, largely as a result of the prioritization of mental health as integral part of the response to the COVID-19 pandemic, as exemplified in the integration of MHPSS throughout the Global Humanitarian Response Plan (GHRP) for COVID-19.

In the session, MHPSS Technical Working Group Coordinators from five different humanitarian emergencies, including Yemen, talked of the response to emerging needs in their respective countries while international organizations, standby partners and donors briefed on global initiatives to support country work in this area.