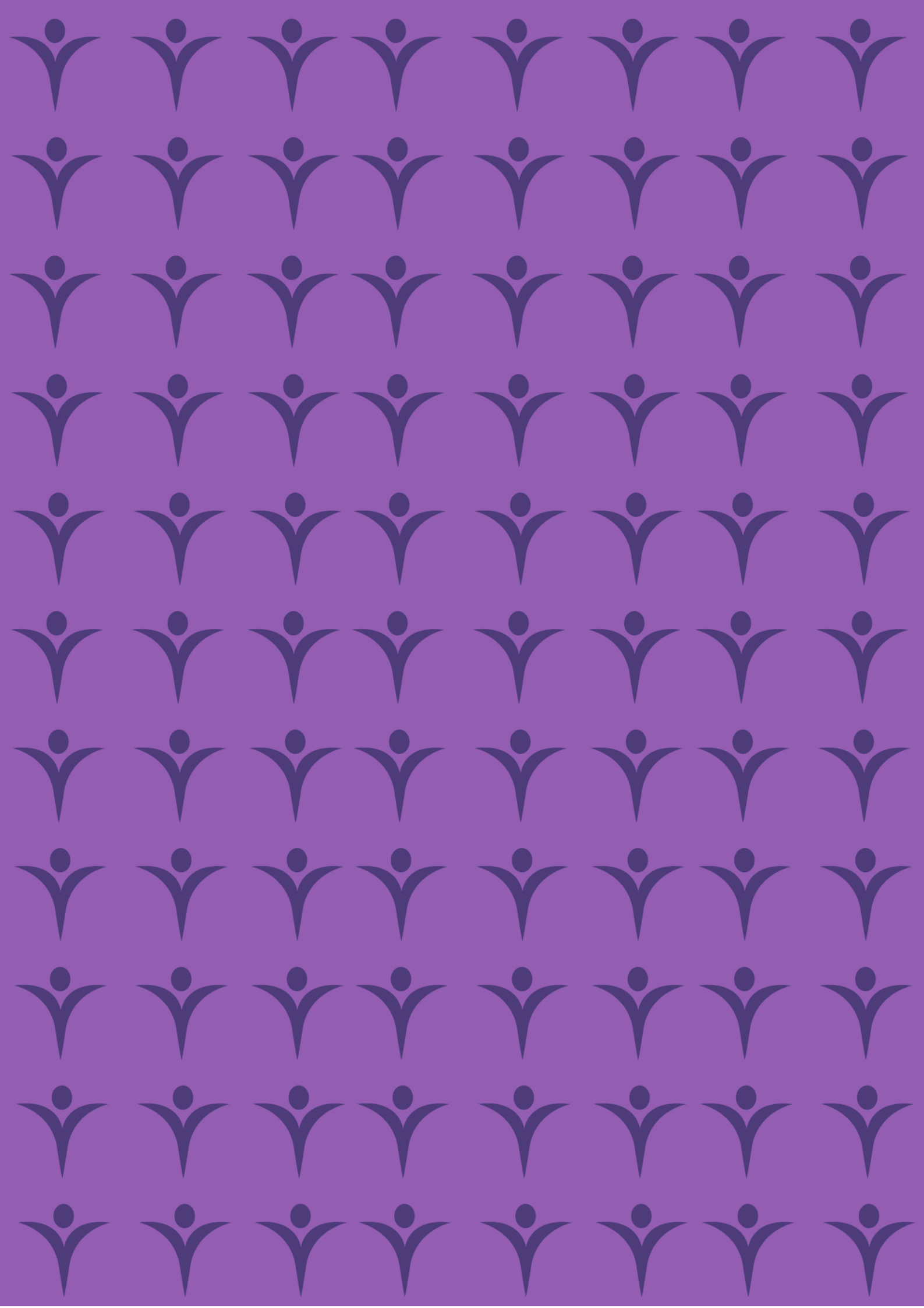# Mental Health and Self-care

Information Booklet
for Young People
and Young Key Populations

Youth LEAD

About Youth LEAD

Youth LEAD works to empower adolescents ages 14-18 and young key populations ages 18 - 30 at the grassroots level from across the Asia Pacific region.

Youth LEAD was established to strengthen partnerships among organisations working on key population issues across the region and to equip our members with the necessary knowledge, skills and tools to advocate for change.

Adolescent and young key populations bear disproportionate burdens of HIV and are most at risk for HIV infections. Our organisation and programs are led, designed, and implemented by young people, working for young people. We embrace each other's differences and celebrate our similarities, connected by our values and needs of being young and our shared passion for ending HIV/AIDS.

Mental Health and Self-care

Information Booklet for Young People and Young Key Populations

Content

List of Acronyms

APAC	Asia-Pacific
COVID-19	Coronavirus Disease 2019
HIV	Human Immunodeficiency Virus
KP	Key Populations
LGBT	Lesbian, Gay, Bisexual, and Transgender
PHDP	Positive Health, Dignity, and Prevention
PLHIV	Human Immunodeficiency Virus
UNICEF	United Nations International Children's Emergency Fund
YKP	Young Key Populations
YPLHIV	Young people living with HIV

Introduction

Young people aged 14 to 30 years old experience a significant burden of mental health disability globally. These challenges are associated with the biological predispositions and psychosocial factors related to the age, socio-economic status, sexual and gender identities of young persons[1]. Among young key populations (YKP), the risk for developing mental illness is heightened by other vulnerabilities such as early sexual debut, high numbers of sexual partners, low condom use, transactional sex, needle sharing, including drug/alcohol abuse. Consequently, evidence indicates that YKPs have elevated risk for acquiring HIV and other related infections due to prolonged exposure to this vulnerability factors[2]. Unfortunately, there remains a significant treatment gap for mental health-related challenges among YKPs likewise, YKPs who are living with HIV lack competent and accessible youth-friendly and gender-affirmative mental health and/or HIV services[3].

About this booklet:

This booklet is prepared by Youth LEAD to serve as a reference tool for YKPs who may require information related to their mental health and self-care.

The rationale for this booklet is to provide YKPs with a quick reference guide that can be used to understand and manage their unique mental health and self-care needs.

The content of this booklet can also suffice as a toolkit that can be used to educate YKPs on common mental health challenges associated with exposure to adverse situations.

Equally, this booklet offers YKPs with information on how they can apply basic non-specialized psychosocial support (PSS) techniques to manage the mild psychological challenges that they and their peer's encounter.

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[1] Mutumba, M., & Harper, G. W. (2015). Mental health and support among young key populations: an ecological approach to understanding and intervention. Journal of the International AIDS Society, 18, 19429.

[2] Ibid.

[3] Peter A. Newman, Shirley Mark Prabhu, Pakorn Akkakanjanasupar & Suchon Tepjan (2021): HIV and mental health among young people in low-resource contexts in Southeast Asia: A qualitative investigation, Global Public Health, DOI: 10.1080/17441692.2021.1924822.

This booklet aims to:

1. Provide an overview of the common mental health challenges faced by YKPs from four regional organizations across Asia-Pacific (APAC) and Africa.
2. Examine the unique risk factors that exposes YKPs in these regions to developing mental health challenges.
3. Explore how YKPs with mental health challenges can access youth-friendly services
4. Ascertain the wellbeing and self-care practices that YKPs can use to promote resilience especially, in adverse situations

How to use the booklet?

The content of this booklet is presented in 3 parts. Each part addresses specific subject matter that are grouped together based on content area. To guide the delivery of the material, the various parts are further divided into sessions. These sessions are used to present readers with the ideas contained in each topic of interest or specific theme.

In the pages of this booklet, you will find QR codes that you can scan using the camera of your smartphone. This will take you to various links where you will find more information about specific topics or contents.

Part 1 **Mental Health Challenges among Youths and Young Key-Populations (YKP)**

The first part of this booklet is focused on introducing readers to the concept of mental health and how mental health challenges occur among young people. The different sessions for part 1 provide an overview of the mental health conditions that are common among young people and especially, young key populations (YKP) in APAC, and Africa, regions. This part also highlights some factors that increase the chances of developing mental and psychosocial health challenges among YKP's in the various regions. Equally, the content for this part examines the impact of mental health-related challenges on YKP's in the regions.

Session 1: Understanding Mental Health

⌖	*Purpose:*	*To increase knowledge about mental health as well as the intersection between mental health and mental illness*
💡	*Methods:*	*Teaching, brainstorming*
🖌	*Materials:*	*Projector/copy of the booklet, flip chart, pen & sticky notes*
☛	*Resources:*	*QR codes*
🕐	*Time:*	*45 minutes*

What is Mental Health?

Mental health is a component of well-being that involves how a person feels, thinks, and behaves. When a person's mental health is affected, they may develop a wide range of conditions that changes emotion, thinking, or behavior in a negative way. This is referred to as mental illness.

"Mental health is a state of wellbeing that enables a person to realize their own abilities, can cope with the normal stresses of life, can work in a productive manner and make meaningful contributions to their community" (WHO, 1948).

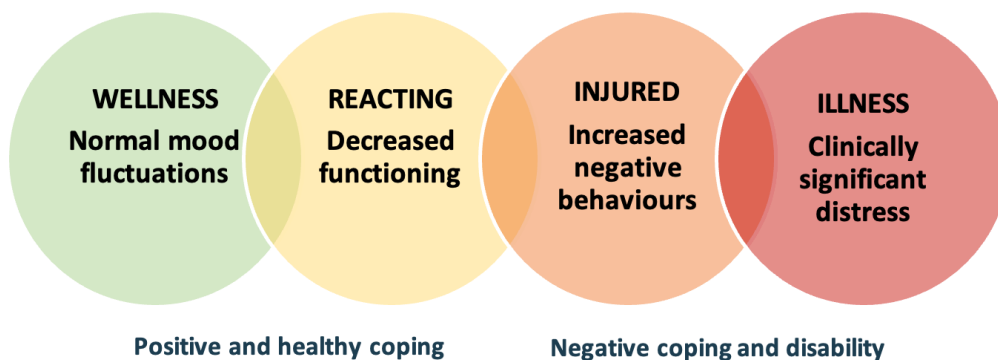## Intersection between mental health and mental illness

Figure 1. Mental Health Continuum Model

The table above illustrates the relationship between mental health and mental illness. This relationship can be explained using the mental health contiruum model [4].

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[4] The Mental Health Continuum Model (2017). The Department of National Defense, Calgary Police Service, and the Mental Health Commission of Canada.

According to this model, there are four (4) dimensions to mental health as see on figure 1. These phases range from wellness to illness and indicates the mental state of a person at any time. The following is an overview of these phases:

- The state of wellness is determined by a person's ability to successfully manage or resolve their daily challenges or stressors.
- Not being able to handle the day-to-day challenges or stressors, can result in negative reactions characterized by poor decisions, or low levels of functioning.
- A person may feel injured when the level of disturbances that they experience persists without any relief or improvement.
- Mental illness or conditions may develop when the disturbance in daily life causes significant distress to the persons functioning (feeling, thinking and behavior), including how they interpret experiences (what they see, hear smell or taste) and their relationship with others.

Mental health conditions among marginalized groups

Marginalized persons or groups consist of individuals who are significantly predisposed to disturbing experiences compared to the general population. Marginalized group include:

Who do you consider as marginalized persons or groups in your region?

- key populations (KPs)[5] like Sex Workers (SW), Men who have Sex with Men (MSM), People Who Inject Drugs (PWIDs), Transgender (TG), Persons in Confinement.
- Lesbian, gay, bisexual, trans and gender diverse, intersex, queer, or questioning (LGBTIQ+)[6] communities.

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[5] Field, M. J., & Lohr, K. N. (1990). Definitions of key terms. In Clinical practice guidelines: directions for a new program. National Academies Press (US).

[6] https://www.stonewall.org.uk/help-advice/faqs-and-glossary/list-lgbtq-terms

Because of the multiple challenges or syndemic health burdens that they experience, marginalized groups are usually at an increased risk of developing mental health conditions. However, these persons lack access to comprehensive health services due to individual, family, social, psychological, and physical factors.

Scan these QR Codes with your smartphone for more understanding of key terms!

SCAN ME   **SCAN ME**

Session 2: The burden of mental illness among youths and young key populations (YKP)

⌖	**Purpose:**	*To educate on the burden of disease attributed to mental health*
💡	**Methods:**	*Presentation, discussions (Exercises 1 and 2), brainstorming activity*
✏	**Materials:**	*Projector or copy of booklet, mobile device*
✒	**Resources:**	*QR codes*
🕐	**Time:**	*2 hours 30 minutes*

Early warning signs of mental illness among young persons

It is difficult to tell precisely if a person is experiencing a mental health challenge. This is so because mental health conditions can manifest in different ways and at various timelines in a person's life. There are subtle early warning signs, and more prominent late signs that may indicate the onset of mental illness. Data on the prevalance of mental health conditions among young persons have shown that [7] :

"Mental health is a state of wellbeing that enables a person to realize their own abilities, can cope with the normal stresses of life, can work in a productive manner and make meaningful contributions to their community" (WHO, 1948).

- 50% of mental health conditions among young person's emerge by age 14.
- 75% of mental illnesses among young persons are diagnosed by 25 years.
- 70% – 75% of children and young persons who experience mental health conditions do not have an appropriate intervention at a sufficiently early age.

10-years Treatment Gap	There is an average of 10-year delay between when a young person experiences their first symptom of mental illness and when they receive help.
	Lack of access to early intervention for adolescent mental health conditions into adulthood, can impair both physical and mental health and may impact living a fulfilled adult live.

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[7] https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health
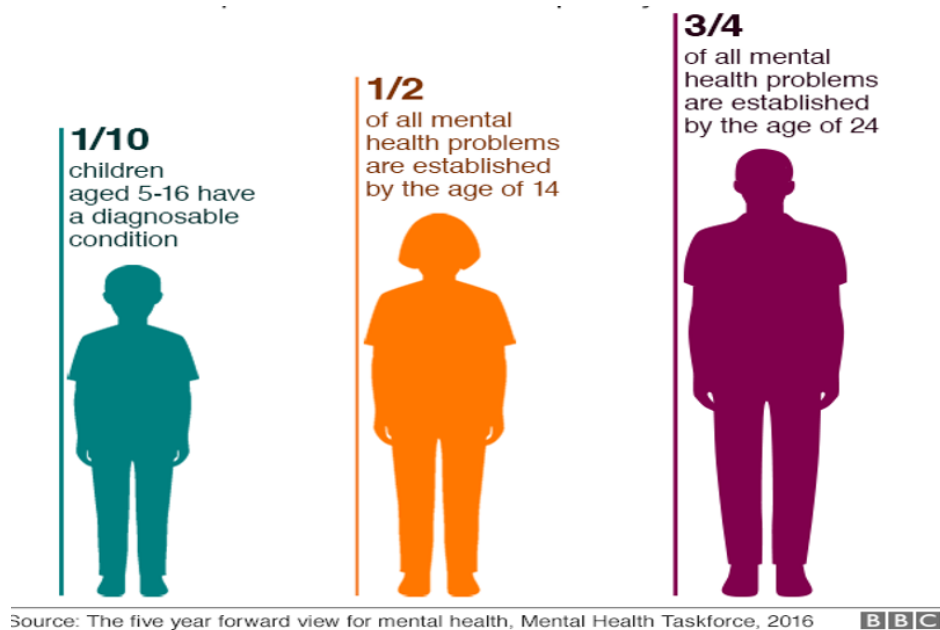
Children and Young People: Mental health problems often develop early

Exercise 1.

Group each of the subtle psychological distress signs of mental health-related conditions on table 2 below, into:

- Behavioral
- Cognitive and,
- Thought patterns.

The goal of this exercise is to strengthen your ability to identify early psychological distress signs in self and others to seek early intervention.

Table 2 illustrates some of the early warning signs that could indicate that a young person might be going through a mental health-related condition.

SUBSTLE SIGNS (SUDDEN)	PROMINENT SIGNS (ACUTE)
1. Unprovoked irritability	1. Mood disorders
2. Reduced energy level	2. Anxiety disorders
3. Persistent low mood	3. Conduct disorders
4. Poor appetite and/or sleep	4. Intellectual disabilities
5. Increased irrational actions	5. Sexual dysfunctions
6. Withdrawal, isolation, low motivation	6. Gender dysphoria
7. Hopelessness and/or helplessness	7. Oppositional deviant disorder
8. Unexplainable avoidance	8. Intermittent explosive disorder
9. Persistent negative ideations	9. Alcohol/substance use disorder
10. Unusual expressive writing	10. Obsessive-compulsive disorder
11. Frequent emotional outburst	11. Stress-related disorders
12. Declined academic performance	12. Psychotic disorders
13. Deteriorating self-care practices	13. Elimination disorders
14. Decreased engagement with peers	14. Attention-deficit/hyperactivity disorder
15. Increased risk taking or suicidality	15. Suicide and self-harm

Table 2. Warning signs of mental health conditions among young persons.

Common mental health conditions among YKP

Young people, especially young key populations (YKP) as well as other LGBTIQ+ communities are 2 – 3 times more at-risk of developing mental illness compared with the general populations[8].

Do you know that having a mental health condition at an early age can expose a person to more vulnerable situations including HIV, negative health outcomes, alcohol, and substance abuse, GBV, poor social support network, academic or occupational problems as well as sexual and gender-related challenges?

In the context of HIV, the chances of developing mood, anxiety, and cognitive disorders are exacerbated among KPs due to the complex biological, psychological, social, and religious challenges that PLHIV are exposed to or experience (NIMH, 2015).

In 2020, key populations and their sexual partners accounted for 65 percent of new HIV infections globally[9].

Exercise 2.

For each of the symptoms of mental illness highlighted on table 2 (page 14):
1. See if you can identify the most common mental health conditions among YKPs in your region.
2. Are there other mental health conditions among YKPs that are specific to your local context?

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8 https://www.undp.org/publications/looking-out-adolescents-and-youth-key-populations
9 www.usaid.gov/global-health/health-areas/hiv-and-aids/technical-areas/key-populations

Session 3: How early experiences affect YKP

🎯	**Purpose:**	*To provide insight on the benefits of early interventions for YKPs with mental health conditions*
💡	**Methods:**	*Teaching, discussions (Exercise 3), and group work activity*
🗳	**Materials:**	*Projector/booklet, flip chart, pen, sticky notes, mobile device*
👆	**Resources:**	*QR codes, word cloud*
🕐	**Time:**	*1 hour 30 minutes*

Determinants of mental illness among YKP

Many factors can contribute to the emergence of mental health challenges among YKPs. These include biological, physical, psychological, social, and spiritual risk factors. However, the determinants of mental illness usually vary across persons. Whereas exposure to multiple risk factors can heighten a person's chances for developing a mental health condition; there are many pathways leading to the emergence of any mental disorder. Evidence have shown that exposure to similar risk factors does not always lead to the same mental health condition for the survivors likewise, different risk factors can lead to the same mental health condition for different persons[10].

Exercise 3.

The Word Cloud on the next page highlights common predictors of mental illness across APAC, and Africa, regions. Group each factor into **biological**, **physical**, **psychological**, **social**, and **spiritual** risk factors that may increase the chances of developing mental illness among YKPs in your region.

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[10] Almy, B., & Cicchetti, D. (2018). Equifinality versus multifinality. In M. Bornstein (Ed.), The SAGE encyclopedia of lifespan human development (pp. 764-765). SAGE Publications, Inc., https://dx.doi.org/10.4135/9781506307633.n285

Impact of exposure to traumatic events on YKP

Trauma and stressor-related manifestations

Re-experiencing – This has to do with intrusive recollections or flashbacks of specific aspects or entire details of a traumatic event or feeling, long after it occurred.

Avoidance – This involves consistently staying away from all internal and external reminders of a traumatic experience.

Hyperarousal – This involves feeling very anxious, on edge and unable to relax due to fear of being exposed to similar or same event.

Dissociation – This is related to the conscious or unconscious effort to numb, block, or detach from painful memories of a disturbing event, minimize, or deny them.

The text box above shows some clinically significant signs of trauma on a survivor. However, it is important to note that trauma affects everyone differently and that these signs may not necessarily manifest in all persons who are exposed to traumatic events.

In the first session of this booklet, an overview of the mental health continuum model was presented to provide readers with insight on how a person may move from a healthy state of mental health to being mentally ill. It was noted that the amount of negative life experiences that a person is exposed to can affect how they cope with present or subsequent stressors including how they adjust to other events overtime.

Similarly, it is important to know that some persons may exhibit mild symptoms of psychosocial distress following exposure to a negative or stressful experience. However, these could degenerate into moderate to severe symptoms of trauma, if prolonged. Other factors that may equally influence the level of psychosocial distress that a person expresses include age, gender, duration of exposure, intensity of the experience and time of exposure (early, mid, or late part of life).

For instance, when a person experiences a negative event at an early age, they are likely to have the memories of this event stored in their brain. This is because the developing brain is very vulnerable to trauma that is experienced in early life [11]. Consequently, exposure to disturbing events such as abuse, violence, war, natural disaster, displacement, or other health-related crisis like HIV or COVID-19 can affect mental health and psychosocial wellbeing.

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[11] https://www.nctsn.org/what-is-child-trauma/trauma-types/early-childhood-trauma/effects

> " For me, the pandemic was related to mental health instability because before then, I had depression and the pandemic made the condition to last a longer time as I had nothing to do."
>
> **Young person, Mongolia.**

Part 2

Early Interventions for Youths and YKP With Mental Health Conditions

The second part of this booklet will focus on exploring opportunities for early interventions for YKPs with mental health conditions. The contents will include an assessment of the available mental health and psychosocial support (MHPSS) resources and services for YKPs and young persons who are living with HIV (YPLHIV). This part will ascertain the presences and use of screening tools to identify mental and psychosocial health-related challenges among YKPs in the various regions. It will also aim at examining the various services and resources that AYPs from these regions rely on for basic non-specialized psychosocial support (PSS) and/or specialized mental health (MH) interventions.

Session 1: Mental health resources and services for YKP and other marginalized groups

🎯	**Purpose:**	*To provide evidence-based resources for managing mental health challenges among YKPs and other vulnerable groups*
💡	**Methods:**	*Discussions, brainstorming activity*
🪴	**Materials:**	*Projector or copy of booklet, sticky notes, mobile device.*
👈	**Resources:**	*QR codes, word cloud*

Increasing access to mental health resources

People with mental health conditions are generally less likely to have access to adequate healthcare compared to those with physical health needs. Among marginalized groups like YKPs, PLHIV and other LGBTQI+ communities, having access to mental health services can be more difficult compared to the general populations. Unfortunately, early intervention for mental health and psychosocial challenges among marginalized groups is often negligible or inaccessible[12, 13]. The following were identified as the gaps in mental health services across Asian-Pacific and African regions during the Youth LEAD consultation with young persons:

- Poor funding of mental health service delivery systems, huge service cost,
- Inadequate trained mental health workforce,
- Lack of age-appropriate and KP-friendly services or healthcare providers.

How accessible are mental health resources or services in your region?
Are there organizations that specifically respond to the mental health needs of YKPs especially, those living with HIV in your region?
Can you think of other reasons for the limited availability of mental health resources or services for marginalized groups in your region?

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12 Priebe, S., Matanov, A., Schor, R., Straßmayr, C., Barros, H., Barry, M. M., ... & Gaddini, A. (2012). Good practice in mental health care for socially marginalised groups in Europe: a qualitative study of expert views in 14 countries. BMC Public Health, 12 (1), 1-12.

13 Priebe, S., Matanov, A., Barros, H., Canavan, R., Gabor, E., Greacen, T., ... & Gaddini, A. (2013). Mental health-care provision for marginalized groups across Europe: findings from the PROMO study. The European Journal of Public Health, 23(1), 97-103.

Mental Health Access for Marginalized Communities [14]

Digital Resources for Mental Health [15]

Finding Therapy for Mental Health Challenges [16]

Children and young people's mental health [17]

[14] thehumanist.com/commentary/mental-health-access-for-marginalized-communities/

[15] https://socialworklicensemap.com/social-work-resources/mental-health-resources-list/

[16] https://www.asianmhc.org/

[17] https://www.childrenssociety.org.uk/information/young-people/well-being/resources

Session 2: Mental health screening for YKP

🎯	**Purpose:**	*To promote the integration of routine mental health screening for YKPs*
💡	**Methods:**	*Teaching, discussions, practice*
🗂	**Materials:**	*Sample screening tools, protocols, and job aids*

Early interventions for youths and YKPs with mental health challenges

Responding with appropriate treatment at an early stage can reduce the risk of mental health symptoms from worsening[18]. However, the importance of early intervention for young people with mental health challenges barely receive the attention and urgency required to minimize. Despite the early development of most mental illnesses, young people are less likely than other age group to report or access mental health services for several reasons.

The YouthLEAD's regional consultation with young people and YKPs from Asia pacific and Africa highlights some factors responsible for the lack of early intervention services for young persons with mental health symptoms. These include: conflict, distance, lack of mental health structures or frameworks, cost of services, traditional perceptions about mental illness.

> ❝ One of the key challenges to mental health in South Sudan currently is, we do not have data on mental health as a country. This has affected interventions to mental health specifically for key populations and young people living with HIV. Currently in South Sudan, we do not have a facility that is designated to mental health so that makes it quite challenging for us to start interventions on mental health since there are no proper referral pathway on mental health."
>
> **Young person, South Sudan.**

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[18] McGorry, P. D., & Mei, C. (2018). Early intervention in youth mental health: progress and future directions. Evidence-based mental health, 21(4), 182-184.

To increase early identification of the symptoms of mental illness among YKPs, programs for these age group can:
- Promote the integration of routine screening for mental health-related challenges.
- The creation of regional preventive and diagnostic service for mental health challenges can be used to identify and address early symptoms of psychological distress before a decision for specialized referral, if required.
- The provision of brief intervention alongside routine screening for mental health challenges for YKPs is equally important.

Figure 2 below illustrates how mental health can be integrated into interventions for YKPs and young PLHIV at community or facility levels.

Figure 2. Integrated mental health approach to care

Screening for youths and YKPs with significant mental health conditions

Young people often lack adequate access to mental health care. To promote access to mental health screening for young people, the following tools can be considered to screen for common mental health (CMH) conditions like depression, anxiety, ADHD, substance abuse, GBV or suicide risk among YKPs. It is strongly recommended to consult a trained mental health service provider to determine how best to use any positive response to the screening questions in any of these tools.
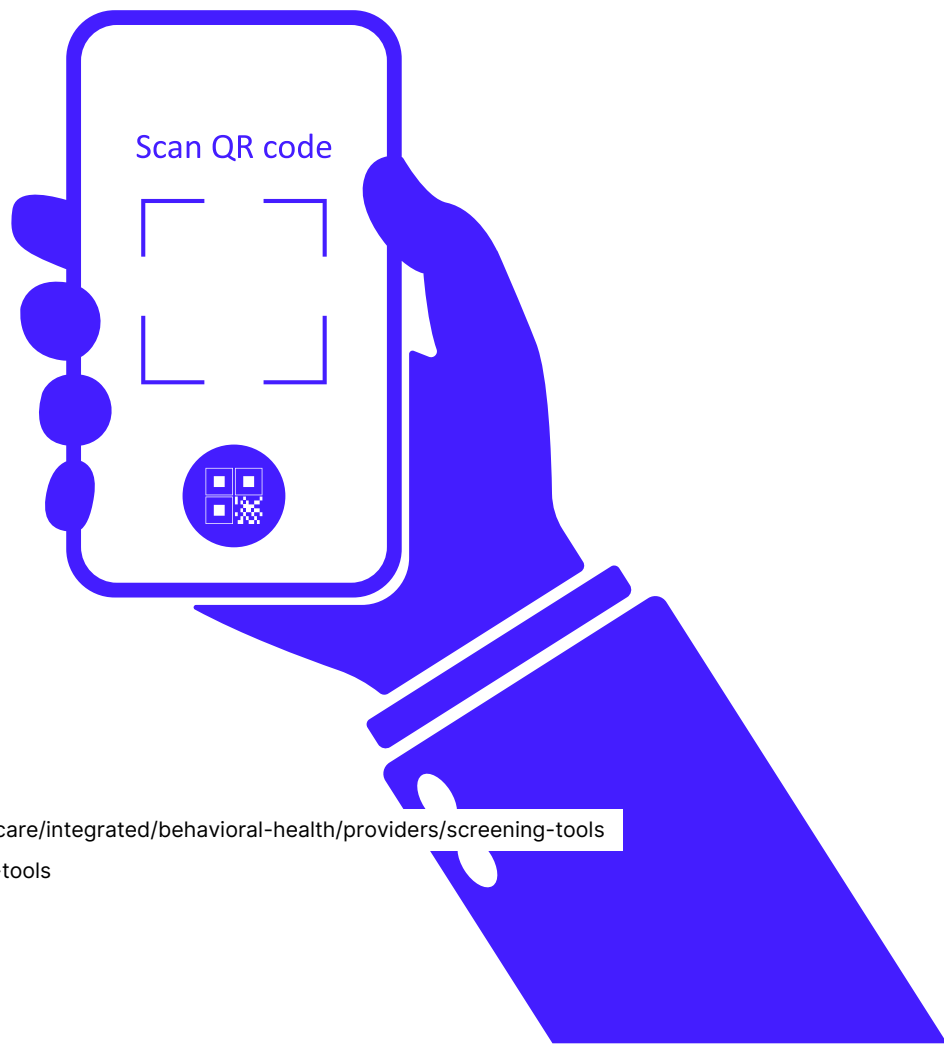
Mental health screening tools for young people [19, 20] :

SCAN ME

SCAN ME

Scan QR code

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19 https://medicine.iu.edu/psychiatry/clinical-care/integrated/behavioral-health/providers/screening-tools

20 https://cps.ca/en/mental-health-screening-tools

Session 3: Mental health service gaps among YKP

🎯	**Purpose:**	*To review existing treatment gaps for YKPs with mental health conditions*
💡	**Methods:**	*Brainstorming activity, teaching, discussions (Exercise 4)*
🗒️	**Materials:**	*Projector or copy of booklet, sticky notes, mobile device*
👉	**Resources:**	*Word cloud*
🕐	**Time:**	*45 minutes*

Limitations to mental health care for youths and YKP

There is a huge treatment gap for mental health conditions in many countries and regions around the world. Available data indicates that:

- 4% of the global burden of disease is attributed to mental illness,
- Only 75% of children and young persons who experience mental health conditions have the appropriate intervention at an early age.
- Undiagnosed mental illness, particularly at a younger age can increase the chances of other health and behavioral risks like drug abuse, experience of violence, risky sexual behaviors including exposure to HIV, STDs, and unintended pregnancy [21].
- These conditions may be exacerbated among some populations who are more disadvantaged.

Do you know the global burden of disease attributed to mental illness?

Do you know the percentage of young persons with mental illness in your region?

What is your regional rate for diagnosed mental illness among young persons?

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[21] CDC (2021). Adolescent Behaviors and Experiences Survey (ABES): https://www.cdc.gov/healthyyouth/data/abes.htm?s_cid=tw-zaza-2022-abes

Exercise 4.

In this exercise, you will see various reasons responsible for the treatment gap' in youth and YKPs mental health services based on a regional consultation with young persons from Asia-Pacific and Africa. Identify factors that may be equally responsible for the mental health treatment gaps for youths and YKPs in your county and then list other determinants for the service gaps.

Part 3

Promoting Resilience, Coping, and Self-Care Practices among Youths and YKP At-Risk of Developing Mental Health Conditions

The third part of this booklet will focus on building essential skills for psychological resilience, coping and self-care among youths and YKPs who are exposed to multiple vulnerabilities due to gender, sexual, behavioural, psychological, physical, or other structural risk factors. The contents will include links to various resources that can be referenced to strengthen and promote resilience and self-care practices. Also, this part of the booklet will present some possible feedback for scaling up mental health services among based on the YouthLEAD regional consultation with young persons.

Session 1: Building resilience in adversity

⌖	**Purpose:**	*To increase awareness on protective factors for mental illness among YKPs*
💡	**Methods:**	*Teaching, brainstorming activities, discussions (Exercise 5)*
🗃	**Materials:**	*Projector or copy of booklet, sticky notes, mobile device*
☞	**Resources:**	*QR code*
🕐	**Time:**	*1 hour*

Resilience and mental health of YKP

In part 1 of this booklet, mental health was defined as "a state of wellbeing that enables a person to realize their own abilities, can cope with the normal stresses of life, can work in a productive manner, and make meaningful contributions to their community [22]. Whereas

> Resilience is the ability of a person to cope with emotionally disturbing experiences and remain healthy even in the presence of risk factors.

this definition recognizes the existence of normal stressors in life, it also noted that the individual's ability to cope with the occasional difficulties of life is essential to their psychological wellbeing.

To better appreciate this assumption, it is important to understand that:

1. Stress is a normal psychological and physical reaction to either positive or negative situations in life.
2. For the YKP, the causes of stress may range from the developmental storms experienced from childhood through adulthood including having to deal with the periods of transition and the various risk factors earlier highlighted in this booklet.
3. However, experts have argued that some amount of stress have positive effects [23].
4. For example, an YKP may benefit from the fear of getting infected with HIV after an unprotected sex triggers their health-seeking desire for post-exposure prophylaxis (PEP) to prevent HIV transmission.
5. "It is only when stress becomes chronic, or when we feel we are no longer in control of a situation, that it can negatively affect our health and wellbeing [24].

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[22] (WHO, 1948).

[23] Sanders, R. (2013). Researchers find out why some stress is good for you. University of California, Berkley News.

[24] https://www.health.com/condition/stress/5-weird-ways-stress-can-actually-be-good-for-you
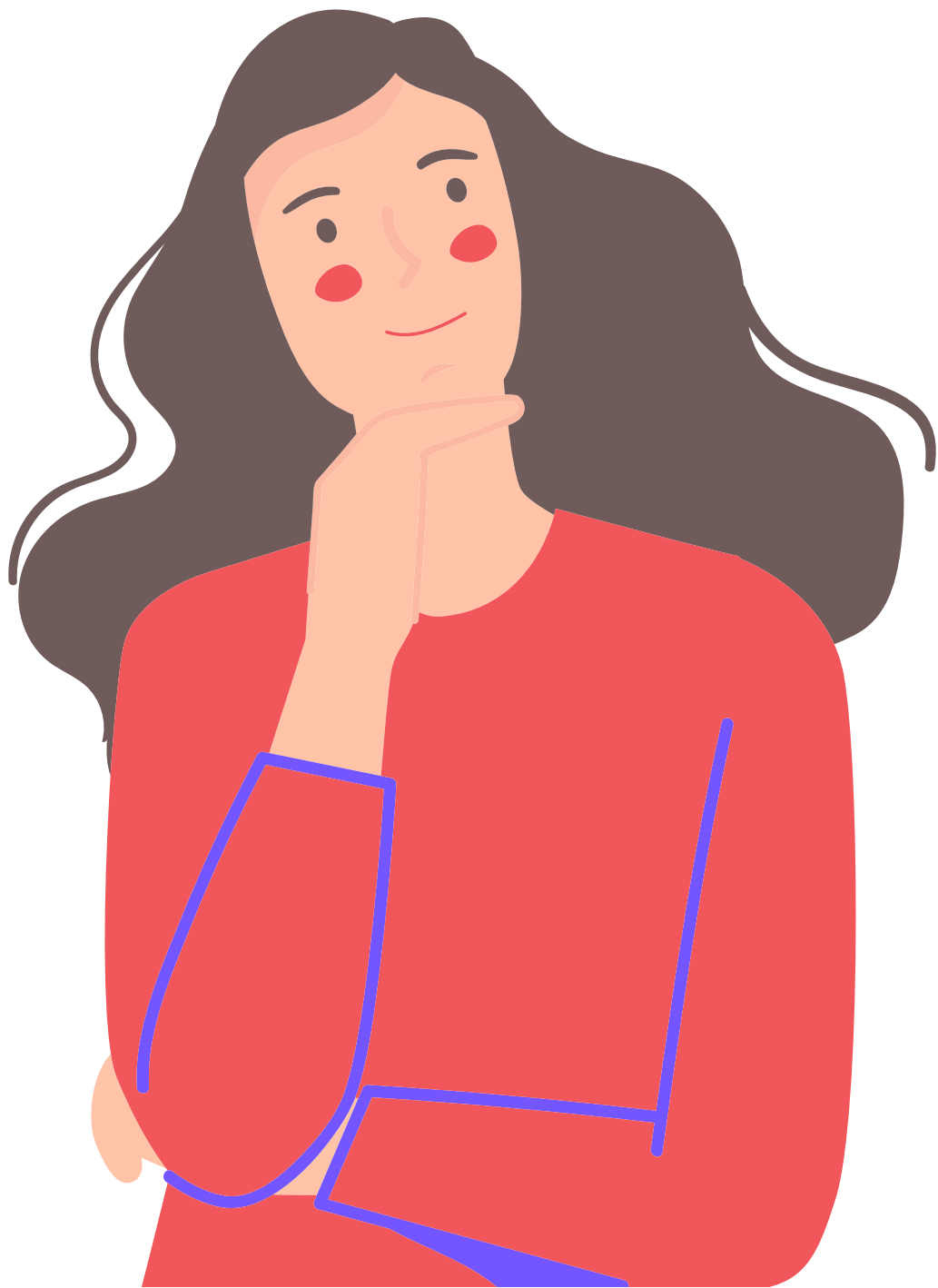
Can you think of the people, places or things that help lessen the effect of a negative experience or event on you?

How can such protective factor(s) be strengthened among YKPs and/or young person's living with HIV in your country?

! For a list of protective factors, refer to Exercise 3 (page 16)!

Building Resilience among YKP

Resilience is an adaptable skill and an early prevention mechanism that young people can build or strengthen overtime. Resilience can be achieved by:

- Leveraging a person's experiences with various risk factors and the resources around their protective factors.
- Building resilience among YKPs is important particularly due to the psychosocial challenges that they face.
- To become more resilient as a young person, a combination of mental, physical, social, and spiritual attributes is required.
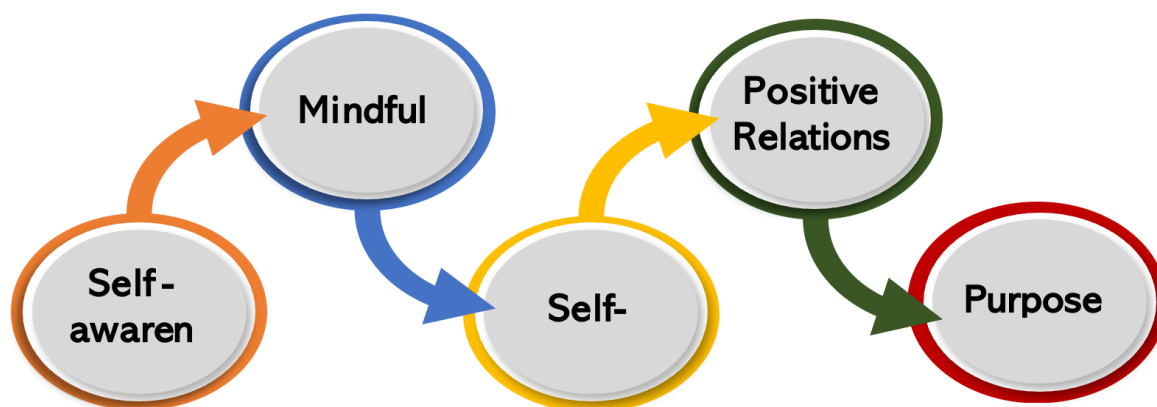- These attributes are usually represented by 5 pillars as illustrated below.

Figure 3. The 5 pillars of resilience

Exercise 5.

For this exercise, you are expected to:

1. Share with other peers what each of the 5 pillars of resilience represent to you as a person.
2. Discuss how to build or strengthen each of these skills using the available resources at your disposal.

You may scan the QR code to download a pdf document on resilience

Session 2: Weathering the storm as an YKP

🎯	**Purpose:**	*To strengthen wellbeing, coping and self-care practices among YKPs*
💡	**Methods:**	*Teaching, discussions (coping and self-care practices), brainstorming*
🗄	**Materials:**	*Projector or copy of booklet, sticky notes, mobile device.*
✏	**Resources:**	*QR code*
🕐	**Time:**	*1 hour*

Improving the health and wellbeing of YKP

Although young people do not equally experience the adversity of transitioning into adulthood, the 'storm and stress' of adolescence and young adulthood has been a subject of attention and debate. The reasons for this assertion include:

- physical maturation,
- drive for independence,
- increased salience of social and peer interactions,
- brain development, and
- the dynamic nature and age of young people[25, 26].

For the YKP, the experiences of growing up can be worsened by other vulnerabilities that they endure because of their uniqueness. Despite the presence of different resources that can be used to manage the day-to-day stressors that young people undergo, young people and especially YKPs struggle to seek help for their mental health conditions.

The agenda 2030 of the Sustainable Development Goals has made the transformative pledge to 'leave no one behind' based on the international human rights law and the need to reinforce and improve the health and well-being of all persons regardless of their vulnerabilities[27]. The WHO (2015) declaration is aimed at increasing access to care for groups that are marginalized based on their sexual orientation or gender identity and expression (SOGIE).

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[25] Casey, B. J., Jones, R. M., Levita, L., Libby, V., Pattwell, S. S., Ruberry, E. J., ... & Somerville, L. H. (2010). The storm and stress of adolescence: insights from human imaging and mouse genetics. Developmental Psychobiology: The Journal of the International Society for Developmental Psychobiology, 52(3), 225-235.

[26] Hashmi, S. (2013). Adolescence: An age of storm and stress. Review of Arts and Humanities, 2(1), 19-33.

[27] https://sustainabledevelopment.un.org/content/documents/21252030%20Agenda%20for%20Sustainable%20Development%20web.pdf

Agenda 2030: sustainable development goal	WHO acknowledges that individual's experience common and unique barriers to the enjoyment of the highest attainable standard of health based on their sexual orientation, gender identity and expression (SOGIE).

Coping Strategies for YKP

YKPs can cope with difficulties through several means:

- Usually, when a stressor is seen as something that can be delt with, a young person is less likely to ask for help and more likely to try to cope independently.
- On the other hand, if the person does not find any available resource or trusted network to help them, they are likely to judge the situation as threatening.
- Interestingly, young people are more open to informal support from friends and loved ones than formal support from professionals, especially in difficult moments such as when diagnosed with HIV, while experiencing stigma, discrimination, rejection, or GBV.
- When considering mental health help-seeking behaviors, a young person is more likely to base their decision to seek help on the severity of the problem, accessibility of information or support, and the level of privacy or perceived confidentiality [28].

[28] Pimenta, S. M., Hunter, S. C., Rasmussen, S., Cogan, N., & Martin, B. (2021). Young people's coping strategies when dealing with their own and a friend's symptoms of poor mental health: a qualitative study. Journal of Adolescent Research, 0743558421062115.

Below is a list of some coping techniques used by YKPs in the Asia-Pacific and Africa regions during and in the aftermath of COVID-19. You may find out more about other activities that can be used for coping in difficult situations by scanning the QR codes:

Use of internet, Music, distraction, cooking, breathing exercise in a garden or open space, video games, shopping.

Planting, watering plants, listening to music, virtual gatherings with peers, cleaning, organizing.

Self-care for YKP at-risk of HIV and mental illness

Taking care of oneself is one of the most important but often overlooked behave. This practice is personal and can only be achieved through continuous and deliberate efforts. Generally, it is easier to prevent a health condition than to treat or manage an illness. However, some persons may undermine how crucial it is to look after their own wellbeing.

An estimated 70% to 95% of all illnesses can be managed without intervention (WHO, 1998).

Because everyone perceives and manages challenges differently, self-care practices are:

1. Based on a person's preferred style of rejuvenating or feeling refreshed.
2. Depending on the preferred activity, "the important thing with self-care is not what it looks like, but what it does for the person and how it makes them feel [29]."
3. An YKP can begin a self-care plan that helps them manage their mental health including dealing with the thoughts of being marginalized or coping with difficult situations like HIV, stigma, discrimination, victimization, abuse, or neglect. Remember that self-care can be a single activity or involve a combination of practices that promote a person's health and wellbeing.

According to WHO (2009), "self-care is the ability of individuals, families and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a health-care provider." (WHO SEARO, 2009).

For people involved in the support of others who experiences mental or physical health challenges such as psychologist, lay counsellors, clinicians, nurses, and other frontline humanitarian or development workers, self-care can help minimize burnout and reduce the chances of experiencing secondary traumatic stress that could result from listening to disturbing themes or helping others relieve the negative effects of a traumatic experience.

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[29] https://www.youngminds.org.uk/young-person/coping-with-life/self-care/

Below is a collection of resources put together by the Anna Freud National Centre for Children and Family and a music library that you may explore to see what self-care practices works best for you. This can be accessed by scanning the QR codes.

Self-care practices for young people [30]

Music library for all [31]

[30] https://www.annafreud.org/on-my-mind/self-care/

[31] https://pixabay.com/music

Session 3: Voices for change

🎯	**Purpose:**	*To review existing treatment gaps for YKPs with mental health conditions*
💡	**Methods:**	*Teaching*
🗄	**Materials:**	*Projector or copy of booklet*
🕐	**Time:**	*1 hour*

Optimizing the mental health of YKP

The period between adolescences and young adulthood is an important time for preventing disease and supporting health outcomes. Against the backdrop of optimizing mental health services for YKPs, the Youth LEAD consortium has put together a collection of challenges and way forward that can be considered by programs seeking to integrate mental health and psychosocial support (MHPSS) services for KPs, and other LGBTQI+ communities including young persons living with HIV or other health difficulties.

> " I think, it is about creating avenues for young people to understand mental health. Because one of the worst things about mental health is that most of the time you have to self-diagnose yourself to know that you are undergoing an issue ...
> So, first thing is to educate or sensitize young people to understand the different types of mental health issues that they may face and put-up redress systems for such. (For example), availing counselors at facility level to ensure that instead of having to go to a specialized clinic (young people), could have someone at the facility who can provide some (basic) mental health support and in cases where they are not able to get adequate care, they can then be referred for specialized services."
>
> **Young Person, Kenya.**

> " ... Indeed, we lack spaces where we can discuss issues concerning mental health in our country. The environment is not that conducive enough for a person living with HIV to access mental health services. So, it is very difficult for most young people living with HIV in terms of treatment and adherence because of the stigma and discrimination. There is nowhere to report issues concerning mental health. There are no spaces or places to have a session with a healthcare personnel. It is very important that the community at large is impowered concerning mental health issues because at the end of the day, this young people affected may end up committing suicide if the envir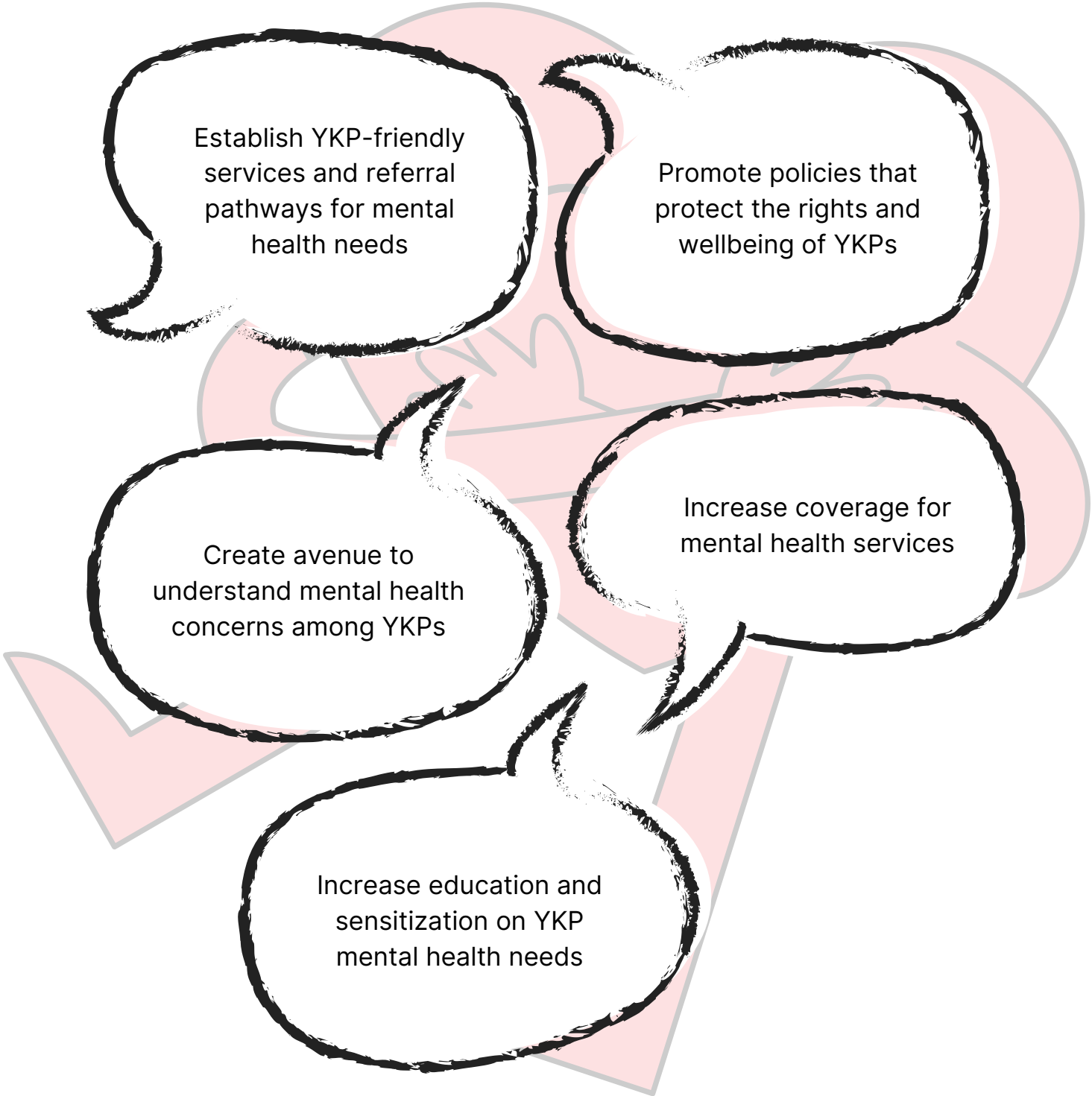onment is not conducive for interactions. On country-specific interventions on mental health, we lack specific policies and rules that safe guide mental health. Although few exist, these are not implemented. So, there is more to address on mental health issues starting from the grassroot to the country level."
>
> **Young Person, Malawi.**

> " When it comes to the triggers (to mental health conditions), there is a lack of economic empowerment. So, most of the programs for young people just focus on advocacy and HIV information and awareness but less of economic empowerment. This is a major challenge for most key populations. Even though they have information about some of the risk factors that pushes them to sex work, they are not economically empowered to be resilient."
>
> **Young Person, Zimbabwe.**

Establish YKP-friendly services and referral pathways for mental health needs

Promote policies that protect the rights and wellbeing of YKPs

Create avenue to understand mental health concerns among YKPs

Increase coverage for mental health services

Increase education and sensitization on YKP mental health needs

Mobile applications that young people may find useful.

In times of adversity, you may consider scanning the QR code below to find a suitable mobile health (mHealth) application to support your mental health and self-care needs as a young person.

Disclaimer: For those who download and use this app, should do so with discretion.

Youth LEAD