



Adolescent Mental Health Summit 2024

Integrated Approaches to Adolescent Mental Health

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Objectives



01

Explore integrated models of care in addressing the needs of adolescents with mental health concerns, considering the integration of medical, psychological, social, and community-based services



02

Share best practices of integrated approaches to adolescent mental health, including collaborative care models, multidisciplinary teams, and coordinated service delivery



03

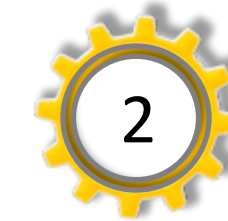
Explore integrated models of care in addressing the needs of adolescents with mental health concerns, considering the integration of medical, psychological, social, and community-based services



Integrated Models of Care



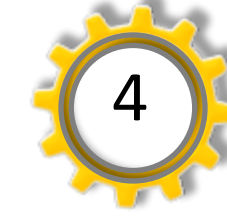
**Policy
Engagement**



**Community Based
Approaches**



**Facility based
approaches**



Digital Model



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Integrated Models of Care

1. Mental health Policy Engagement by AYP

- Meaningful and responsive engagement (hand-holding and mentorship) of AYP in mental health policy making through YACH (Youth Advisory Champions of Health) platforms across the 4 counties e.g. Mental Health Strategic Plan and Mental Health action plan – Mombasa County
- Inclusion of Mental health as a tracked indicator under strategic objective one of Mombasa County AYP Strategy on health (2nd Edition; 2024-29)
 - Strategic Obj. 1: To improve health outcomes for AYP; Specific Obj. 1.3: To improve Mental Health outcomes among AYP
 - The strategies: Capacity building of HCPs to identify and respond on MH among AYPs, integrate MH services in all SDPs, creation of and strengthening peer support groups, establish/Strengthen referral mechanisms, MH awareness campaign, MH Communication strategy



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Integrated Models of Care

2. Community Based Approaches

2.1 *MindSkillz intervention (Mombasa)*

- Adoption of sports-based approach to promote mental well-being of Adolescents and acquire coping skills to help them navigate through their futures
- Youth-led (peers) and interventions at 3 sub counties distributed among 10 administrative wards - [Kisauni (5 wards), Changamwe (3 wards) and Likoni 2 wards)], specifically at community level
- Community engagement and collaboration: to mobilize participants, provide venues, security (Kisauni),
- Referral for psychosocial support (based on a referral pathway that was developed during session with coaches)– link facilities within the implementation areas/wards
- DOH support supervision and mental health service provision by Healthcare providers for the AYP



Integrated Models of Care

2. Community Based Approaches

2.2 IPTG (Mombasa) – County driven

- USAID Stawisha Pwani and other partners supported capacity building 60 Community Health Promoters
- Provide CHPs with essential skills to address depression and improve the quality of referrals

2.3 YACH

- Peer-to-peer support model (Cross cutting in all 4 counties)
- Sensitize, raise awareness to peers on availability of health services
- Provide **community-facility interface** for linkage to compressive health services Including Mental health
- Considerations to train the YACHS on identification, and provision of PFA

2.4 Mental health school campaigns

- Integrated MH through school health program; reached **45** schools, **2,345** students



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3. Facility based approaches

- IEC materials on information and referral for Mental health services
- Integrating **MH screening** into HTS, CCC, and PMTCT services will help to evaluate the prevalence, risks, and impact of mental health among adolescents and young people (AYP) who use these services
- **Training** healthcare providers on implementing the mHGAP model for service delivery
- **Offering a basic set of services** (PFA: Psychological First Aid) to individuals with MH issues
- **Debrief sessions** to healthcare providers to help develop coping strategies for work-related stress, preventing vicarious trauma
- OTZ groups; identifies and addresses MH issues early, promoting better outcomes and overall well-being for young clients
- Monitoring AYP mental health data: maintain quality, accurate documentation, decisions



Integrated Models of Care

4. Digital Model

- Co-created needs based messages to fit Coastal community for use in the digital ecosystem
- Self-learning modules - a variety of information (self-initiated or bulk SMS), digital IEC materials that can be scanned and direct the AYPs to Mental health platform
- Tele-counselling through 1190 toll free hotline (role of USP: sensitize on tele-counselling services and referral for utilization).
- Ride on one2one website on mental health information, lived experiences personal stories by young people of which xx % are from coast region



Best Practices of Integrated Approaches

1. Documentation for learning and scientific conference through;

- **3** International conference abstracts by 3 AYP program officers
- **11** Mental Health Summit abstracts by Mindskillz coaches
- **“Stori Yangu”** e-magazine with peer lived in stores and coping skills, used during sessions by coaches and also help peers to navigate their MH issues
- Audio visual recordings to showcase project impact (coaches, beneficiaries, community, DOH, caregivers/parents)



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Best Practices of Integrated Approaches

2. Integration of Mindskillz intervention to adolescent AYPWDs in Portreitz special school

- **60** AYPWDs/ beneficiaries successfully completed the **12** required sessions and graduated
- Launch of mental health club for continued support of the AYPWDs in need of mental health support (Launch representation of the offices of LVCT Health Directorate, GRS leadership, County leadership both MOH and MOE)
- Mental Health patron to support the club; leadership by the AYPWDs, who meet once weekly
- Integration of Mindskillz into programming
 - Integrated into USAID Tujitegemee OVC program as complimentary intervention for the community
 - Anticipation of change at individual level



Strategies for Promoting Collaboration

- **Broaden the AYP lens** of programming by including all AYP sub populations i.e., (AYPLHIV, AYPWD, AYCL (Adolescent Young Care Leavers), AYBM)
- Promote **shared communication channels** that are secure and reliable to address MH needs of AYP
- Continuously engage the AYP in the project cycles to prevent missing out on essential health needs, services, decision making, and programming
- Use data-driven findings to inform ongoing improvements in mental health integration for AYP
- Create safe and inclusive spaces where young people can express themselves and seek support without judgment
- Adopt a SIRMA Approach: **Structured, Intentional, Responsive** and **Mutually respectful Meaningful** engagement of AYP: training, mentorship, job opportunities, policy making, decision making (*upcoming Abstract on innovative SIRM Approach*)



Strategies for Promoting Collaboration

“What are the key components of youth engagement in programs?” Six TIPS

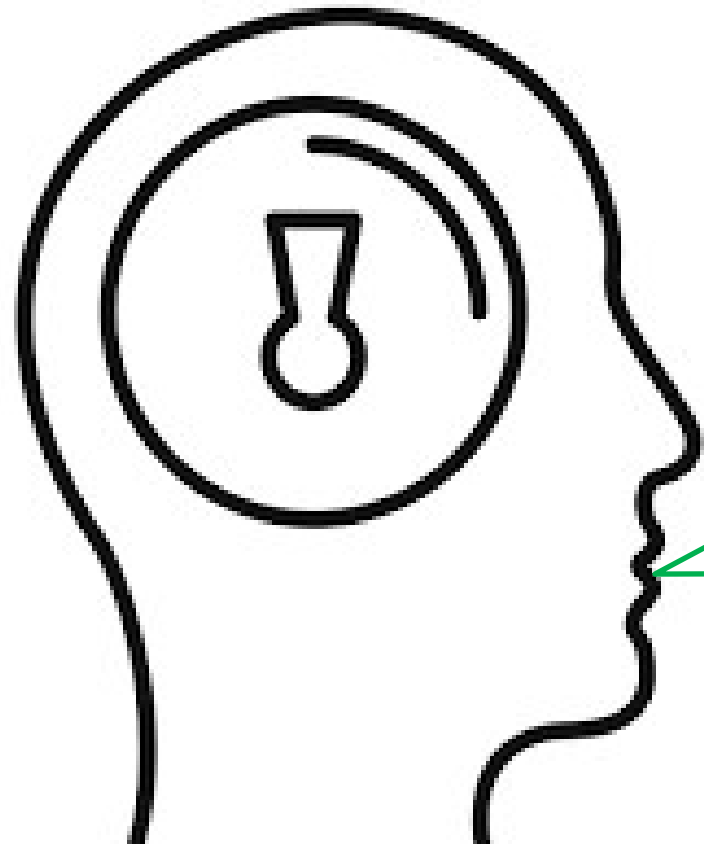
1. Define what Meaningful Youth Engagement looks like for your Program (power sharing, valued contributions, young people's ideas, perspectives, skills and strengths are integrated into the design and delivery of programs, strategies, policies, funding mechanisms and organizations)
2. Plan Short and long-term engagement opportunities – design pathways of engagement
3. Include chances for skills and leadership development - inclusion of opportunities for skills development
4. Engage parents, families, and communities - cultivate buy in, community safe spaces, opportunity to engage adults who are “youth champions” – AYP allyship
5. Invest sufficient resources and time - time, money (AYP Budget, seed grants), and staff i.e., create space for youth in the organization, support youth-led organisations
6. Measure results and AYP engagement

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Thank you

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