



 **MENTAL
HEALTH**



20% of mothers in developing countries experience clinical depression after childbirth



Inadequate nutrition and increased frequency of infections during the first 1,000 days of life can cause irreversible effects on physical and cognitive development



Developing countries spend on average only 0.5% of national health budgets on mental health



14.3% of children in sub-Saharan Africa have “psychopathology”, a mental health problem caused by poor nutrition



1 in 7 children and adolescents in sub-Saharan Africa have significant difficulties, with 1 in 10 having a specific psychiatric disorder, caused by poor nutrition



WHAT IS THE PROBLEM?

Hunger, conflict and natural disasters can have a huge impact on someone's mental health. The constant danger, the daily battle for food and water. The threat of illness without a doctor nearby to help.

The day-in, day-out trauma, the fear of hunger, of death, of losing your mother or father or children, builds up. It leaves scars. It's debilitating. If unaddressed, it can be overwhelming.

Imagine how it might be in a war zone. Not knowing if you'll eat today. Or whether your child will make it home from school. The grinding fear and danger hangs over you, permanently.

The trauma of conflict

Around 142 million children live in conflict zones. Nearly one fifth of people living in and displaced by conflict will need mental health support. One in 20 of those will be prey to a severe mental health disorder.

Take the example of the persecuted Rohingyas. Following violence in Myanmar in the summer of 2017, a huge number of Rohingya refugees crossed the border into Bangladesh. Today, more than 600,000 refugees are still living in dreadful, cramped conditions in Cox's Bazar, Bangladesh.

For Rohingya refugee families living in 'mega camps' in Bangladesh, the trauma of displacement and the impact of the brutal military crackdown, stays with them. Every day, living in insecure, rickety, unsanitary conditions, under leaky and tattered polythene shelters, they are forced to confront the nightmare of their recent past and the bleakness of their futures.

And in Yemen and Syria, fighting has made the already difficult humanitarian crises worse. At the start of 2020, 42 million people across the Middle East region needed urgent help.

In conflict-scarred regions or in emergencies it's vital that mental health care services give people the best chance to rebuild their lives, find work, earn a living and support their families.

Impact of maternal depression

Mental health work is part of our battle against hunger. It makes sense. Imagine the life of a mother living under the poverty line every single day. In a constant battle to feed her children and keep healthy herself so she can breastfeed her baby.

Walking miles on end to find and carry water. Fleeing conflict with only the clothes on her back and the children in her arms. How can a mother in these circumstances have the energy to look after herself, let alone care for her children?

Maternal mental health is not just important for the mother, it also plays a vital role in child

health and development. The relationship is direct. It's simple. It's fundamental.

Research shows that maternal depression often leads to low child immunisation rates, reduced hospital visits and a decrease in breastfeeding. These, in turn, result in higher rates of child illness and malnutrition and badly hold back a child's normal development.

Trauma often causes people to lose their appetite and can destroy the parent-child bond. A child's brain is most active during the first two years of life, so the results of any trauma at a young age can be serious.

Poor maternal mental health, in particular maternal depression, can contribute to children being underweight and stunted. Infants of mothers with poor mental health have been found to have poorer physical, emotional and mental skills, compared to other children.

You can't operate as a human being if you're struck down by trauma. You can't look after your children. Your children struggle to survive, let alone thrive. Their development and life chances are impeded. Mental health care is not a 'nice-to-have' – it's essential.





WHAT IS THE SOLUTION?

We know that good mental health is vital to tackling life-threatening hunger. That's why we focus hard on mental health care and psychosocial support as well as nutrition. We do this in many ways.

Baby friendly spaces

Our Baby Friendly Spaces are a good example of our mental health work. They help pregnant, and breastfeeding women and their children in emergency situations. As well as serving as infant and young child feeding centres, we use them to provide psychosocial help to mothers and children.

Mothers can express their feelings about their life experiences and their past and present difficulties. This helps families to talk – to each other and with others. This in turn helps children and parents to process their common experiences.

Our trained teams of mental healthcare staff encourage children to play, to strengthen family bonds and boost child development in fraught circumstances. They also help build parenting skills, supporting mothers through group discussions to allow them to manage feelings of stress and strengthen their ability to care for their children. They are havens of calm.

Many Rohingya refugees, for example, have taken part in our stress management sessions and received one-to-one and group sessions on coping with memories of the violence they faced when forced to flee their homes in Myanmar.

Sometimes, people just need a breathing space – a safe place away from the angst and conflict of a refugee camp. Somewhere to talk, to think, to take tea, to pause and to be.

We provide those welcoming spaces. For caregivers to relax and spend time with their children, space to breastfeed comfortably and privately, to get

safe drinking water and handwashing facilities. Even feeling clean can have a positive impact on one's mental health. Our colleagues can also refer people to other specialist agencies for help – for vaccinations and antenatal care, for example.

Outreach mental health teams

Our psychologists reach out to the community beyond the walls of their clinics to provide mental health services. They go to people's homes, shelters, water points, schools, community buildings and the like.

Taking mental healthcare to people helps break down barriers and is a way to reach people who are missed or hidden. It is less threatening than expecting someone to go to a health clinic, and lowers the bar to making contact – vital when people are depressed and withdrawn or worried about stigma.

Our outreach teams provide group and individual therapy sessions, organise awareness campaigns in the community and train teachers and community leaders on psychological first aid and mental health awareness.

And we are pragmatists. In crises and conflicts, sometimes you can't provide the perfect service in the perfect way. Life in a warzone just isn't like that. So we meet the people where they're at, whatever that takes.

In Syria we were able to carry on helping families overwhelmed by the ongoing conflict and Covid pandemic by changing our mental health face-to-face appointments and doing them over the phone instead.

By addressing people's mental health, we can help their physical wellbeing as well. And mental health support is fundamental to tackling malnutrition.



QUEEN'S STORY

Queen provides mental health support to displaced people in South Sudan. "This is my first mission, and I've travelled a long way to come and serve my people," says Queen, a young counsellor of 23. She brings emergency mental health support to people who have been forced to flee their homes due to conflict and now live in the isolated hills of Maruwo.

In Maruwo, there is little to support a community of hundreds of displaced people - just a small makeshift market. Action Against Hunger is the only organisation providing assistance here. "When I first came, we were warmly welcomed by a large number of people. You could see their smiles. But behind those smiles, you could also see sadness," says Queen.

Queen helps those who have experienced trauma and loss. "Most places where the emergency team goes are remote areas affected by conflict. In these areas, there are many traumatised people." But when our emergency team started our work in Maruwo, most

people flocked to the health and nutrition facility and ignored the assistance Queen was offering, "In a remote area like this, people don't know about mental health support," explains Queen. So Queen started getting to know the community and raising awareness about her counseling services. Little by little, people began showing up under the tree where she stationed herself for counselling sessions.

During her sessions, Queen listens to people who express grief for what they have lost in the conflict and hears about the difficulties of starting over in a new place after losing a spouse or a parent. "I go to our health facility and I sit under my tree, to be on the same level with the people, and when someone sees me, they come for counselling. And I help people cope with the situation they're living in right now."

"The thought that many people are counting on you gives you hope, strength, and courage to deliver more of your services," says Queen.

Contact us for more information, we would love to hear from you.

For individuals, trusts or foundations - Philanthropy@actionagainsthunger.org.uk

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Together, let's take action against hunger.