

Systems strengthening MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT RESPONSES IN PAKISTAN

COUNTRY/COUNTRIES:

Pakistan

PARTNERS:

Social Welfare Department, Department of Health in Khyber Pakhtunkhwa (KP) Province, Government of Balochistan, the district Child Protection Unit in Balochistan and UNICEF

THEMATIC AREAS:

Mental Health and Psychosocial Support (MHPSS)

COVERAGE OF SYSTEMS CHANGE:

Province and district level – this case study focuses on Balochistan Province

KEY RESULTS:

A comprehensive package of MHPSS interventions has been developed and embedded into the child protection case management and referral system in Balochistan Province during COVID-19. The key components of this package are:

- 1) A legal framework that includes children's protection as a right. This contributed to awareness-raising about the importance of providing MHPSS as a key component of child protection;
- 2) Coordination mechanisms, among governmental and non-governmental institutions that strengthen the child protection strategies that provide MHPSS; and
- 3) A supply capacity mapping and assessment exercise for designing a well-resourced response system.

COVID-19 CONTEXT

As of 23 March 2020, 803 cases of COVID-19 were confirmed in Pakistan, and within one week this number increased six-fold. The

Prime Minister of Pakistan addressed the country, and emergency measures were instituted to guide Pakistan's response to the pandemic. A National Coordination Committee on COVID-19, chaired by the Minister of Health, was set up, along with a Technical Task Team, and responses were coordinated at the provincial levels with local governments.

Subsequently, a preparedness and response plan to combat COVID-19 was launched by the Government of Pakistan on 23 April 2020. Widespread public information campaigns were launched, with 61 million people reached through TV and radio, 2.9 million at-risk populations reached through community engagement, and 64,630 religious leaders (including 23,356 through UNICEF) engaged to promote key COVID-19 messages (UNICEF, 2020).

This unprecedented situation demanded urgent system responses necessary to combat the stress on mental health and wellbeing that children and families across Pakistan were experiencing. This case study details initiatives led by UNICEF aimed at improving systems providing mental health and psychosocial support (MHPSS), with a particular focus on the province of Balochistan.

DETAILS OF PROMISING PRACTICE/ CRITICAL POINT OF CHANGE

UNICEF's strategy in promoting MHPSS was driven by two principles that necessitated looking beyond COVID-19: (i) awareness-raising; and (ii) system strengthening. Since 2015, UNICEF has worked with the Department of Health in Khyber Pakhtunkhwa (KP) Province, to develop a MHPSS programme and set up a mental health unit after a school was attacked by insurgents in Peshawar, capital of KP. When the COVID-19 pandemic happened, the opportunity to build the existing programme into a formal system with possible scale-up to other provinces across Pakistan was recognised. Experience gained from working in KP was adopted, as far as possible, to disseminate and scale up MHPSS interventions in other provinces, particularly through a public-private partnership among the Social Welfare Department and health and civil society organisations with the required technical expertise.

Balochistan is the largest province in terms of area but is the least populated in Pakistan. UNICEF's support to Balochistan began back in 2016 through its role in establishing a child protection legislative framework that is aligned with the United Nations Convention on the Rights of the Child (UNCRC). UNICEF has also contributed to developing a child protection case management referral system to respond to all forms of abuse, violence against children (VAC), exploitation and neglect. The Government of Balochistan is steering this system, of which MHPSS is an integral part. Through UNICEF's substantial advocacy efforts and work with the Government, a comprehensive package of child protection interventions was developed. This system

is backed by a legal framework, and comprises of: (i) case management systems; (ii) training of social service workforce, including child protection officers; (iii) a social behavioural change and communication strategy aimed at preventing VAC; and (iv) the placement of child protection officers in the district model Child Protection Unit in Quetta, the capital of Balochistan. Once trained, child protection officers implement the package of interventions. This entire system was established in Balochistan with a view to ensuring that children in need of protection receive a holistic package of the requisite services, wherein MHPSS is a well-integrated component of child protection efforts.

The COVID-19 pandemic in Pakistan affected social welfare service delivery, a concerning trend that has been seen globally. UNICEF engaged in sustained advocacy to open the district Child Protection Unit to once again become functional and deliver the package of interventions developed. UNICEF's Country Office in Pakistan also developed a training package for social workers, including a translated and adapted version of UNICEF's operational guidelines and presentations to reflect contextualised priorities. In the context of Pakistan, this included an overview of MHPSS, role of communities, and importance of tackling stigma and VAC. Trainings on MHPSS were delivered both virtually and in person.

Innovative approaches were used by child protection officers to provide MHPSS to vulnerable children. One example of this was the online approach adopted by the Government of Balochistan with the support of UNICEF. The district Child Protection Unit in Balochistan runs the entire case management process online, this includes assessments, planning with other stakeholders, referrals, and monitoring until case closure. Within this process, the provision of psychosocial support – including online and face-face support through different therapeutic techniques, was built-in as an initial response.

A highlight of the MHPSS intervention in Balochistan is that it is harmonised with UNCRC as well as the UNCRC's recommendations to the Government of Pakistan. This has been a systematic process that has generated interest across other provinces in Pakistan. It is noted however that approaches in various provinces across Pakistan can vary quite significantly due to contextual differences.

LESSONS LEARNED FOR CHILD PROTECTION SYSTEMS

- **The legal framework became a crucial aspect to system strengthening as it creates statutory obligations for governance structures.** It guides, for instance, the case referrals process, establishing the roles of each department and other service providers involved. As children's protection is a right recognised by the Balochistan Child Protection Act of 2016, it makes it easier for the stakeholders to recognise child protection as crucial and to work towards its enforcement. In addition, it contributed to creating awareness-raising about the importance of providing mental health and psychosocial support as a key component of child protection.
- **Strong government leadership in strengthening the child protection system improves the sustainability of the interventions.** For example, child protection officers were hired by the Government itself and were not outsourced to an external organisation. The Government has also committed public funds for the case management system and is in the process of developing a costed action plan for the implementation of the Balochistan Child Protection Act. Moreover, the system, designed with full ownership of the stakeholders, has influenced fundamental design and growth decisions. For example, the decision to train not only child protection officers but all focal points from the relevant line department was done with the broader goal of social service workforce strengthening. The rapid capacity building of the workforce was built to last well beyond the pandemic.
- **Real-time learning is important for system adaptation.** The continuous data and monitoring carried out as the system is being developed, continuous feedback loops and the documentation of this process including reference documents and standard operating procedures ensures learning is being tracked and documented.

LESSONS LEARNED FOR PARTNERSHIPS: COOPERATION, COORDINATION AND COLLABORATION

- **Connecting all the elements that make up the diverse portfolio of child protection response services was crucial in developing the Balochistan model.** This feeds into the key system learning that it is not only the structures that need to be established, but also ensuring that the functions are set up and understood by all stakeholders.
- **Ensuring institutional knowledge can last through transitions is important for sustainability and should be built into programmatic governance structures.** UNICEF supported the establishment of a technical working group that comprised of officials at the secretariat level (the highest administrative level in government departments) at provincial level as well as officials at the managerial and operational levels. This is key to preserving institutional memory as officials at the secretariat level can often be transferred. By involving a wider group of stakeholders, any system learning is preserved for long-term improvement and management.
- **The rolling-out of a supply capacity mapping and assessment exercise was crucial for designing a response system.** UNICEF supported this mapping, including the Social Welfare, Human Rights and Special Education Department, along with all the relevant line departments and civil society organisations. The results of this exercise were then fed back into existing structures, including the Child Protection Commission as the highest policy advisory body, for validation and ownership, thus creating a critical feedback loop.

KEY CONSIDERATIONS AND QUESTIONS FOR IMPLEMENTATION AND FUTURE ADAPTATION

- **While there have been key innovations undertaken during the COVID-19 pandemic, there is a need to explore how technology and virtual modes of delivery can be improved and adapted in the long-term.** Given the role played by technology, it is equally

important to examine how children with limited or no access to technology and virtual platforms can access these systems.

- The lessons learnt from Pakistan's experience in responding to child protection concerns during the pandemic would be valuable in developing more detailed technical guidance that could be used by other countries. **Existing experiences have also shown that current guidance developed rapidly during the pandemic may need to be continually updated as the situation evolves.** This includes how to connect existing child protection systems with protection response needs emerging from the pandemic.

KEY CONTACTS AND FURTHER RESOURCES:
For more information visit: UNICEF Pakistan Country Office website at <https://www.unicef.org/pakistan/>

REFERENCES:
UNICEF (2020). COVID-19 Situation Report. UNICEF Pakistan, April 2020.

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