

MENTAL HEALTH in North Afghanistan

A contribution to peace and reconciliation funded by
the German Foreign Office
implemented by Ipsos in cooperation with
the Ministry of Public Health in Kabul



Federal Republic of Germany
Foreign Office

ipso

International psychosocial organisation

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Inge Missmahl (right) is an analytical psychologist. She founded the humanitarian organisation Ipso in 2008. She has been working in Afghanistan since 2004 and has developed a culturally sensitive counselling approach officially used as a training manual for psycho-social counsellors employed in the Afghan public health care system.

OUR PROJECT

Ipso is supporting the public health system in Afghanistan by training health staff, promoting cooperation between different stakeholders, and fostering dialogue not only within clinics but also with an outreach component that builds awareness and promotes cultural dialogue between different groups in Afghan society with the aim of promoting peace at individual, family and collective levels.

With the project “Mental health in northern Afghanistan” the German Foreign Office has not only contributed to peace and reconciliation at individual and family levels as a precondition for a stable civil society but has also set a milestone in the mental health component of primary and secondary health care. Through our efforts, mental health is widely acknowledged as a crosscutting issue for lowering mother and child mortality, for coping with the aftermath of war, and for people with disabilities. We have thus been able to foster inclusion of those who suffer from the huge mental health burden caused by a high level of daily stress in Afghanistan. What started in the five northern provinces of Balkh, Kunduz, Badakhshan, Baghlan and Takhar is now continued

in the remaining 29 provinces of Afghanistan: psycho-social counsellors and medical doctors are working closely together in health facilities providing primary and secondary health care; national mental health trainers for each province are trained, and more will be trained. These national mental health trainers will guarantee the sustainability of the project, as they build local capacities within the country. The implementation of the project exceeded our expectations of what would be achievable in a society deeply affected by war. We learned about the resilience of Afghan women, men and children, about their ability to understand, learn, and to make decisions, to overcome prejudice and to change attitudes once the necessity or need is understood. We learned about the personal strengths individuals displayed in very difficult life situations. We learned about the values and the advantages of a collective society putting great emphasis on family ties, and we also learned about the difficulties individuals and families have with values changing rapidly in a society changing through digital globalisation. We repeatedly experienced the power

of empathy, as was the case when a woman told us: “Because you felt me, I can feel myself again, and and I can participate again in family life and engage in my community.”

We found our assessment confirmed that psycho-social well-being and good mental health are interrelated with the ability to consciously pay attention to one's own culture and values, and their development in a changing world. We felt every single day of the project that together with our excellent Afghan team we had the chance to make a real difference by helping people at an individual level. Sarah Ayoughi and I had worked with most of our Afghan colleagues for many years, and were grateful to be part of a team working extremely hard to make the project an outstanding success.

We wish to thank the German Foreign Office for the support we received at many different levels and the trust shown in our work. We are also deeply grateful to all who made the project happen and to those who continue our efforts on a daily basis with their committed work in the Afghan clinics and ministries, and in our Ipso offices in Afghanistan and Germany.

MARCH

KICK-OFF WORKSHOP IN KABUL FOR ALL STAKEHOLDERS

Ipso invited representatives of all provincial health directorates of the participating provinces, representatives of the implementing organisations, and of the Mental Health Department of the Ministry of Public Health to a kick-off workshop. The aims of the workshop were to introduce the participants to the project, to motivate the provincial health directors and directors of clinics to support the project, to create networks, and to build trust among the stakeholders.

Afghanistan has 34 provinces, each with its own provincial health directorate and, ideally, its own strategic plan for implementing the Basic Package of Health Care Services (BPHS) and the Essential Package of Health Care Services (EPHS). The clinics supported by the German Government are mainly EPHS clinics, whose staff did not include any psychologists or psycho-social counsellors at the time. The EPHS had not yet been revised, and with the exception of Mazar-i-Sharif, a mental health component was almost non-existent. An important aim of the workshop was to create an understanding for the mental health burden of the Afghan population within all public health departments, and thus for the contribution of the Ipso project towards an implementation of a mental health strategy.

As the clinics are run by donor-funded NGOs contracted by the Ministry of Public Health, the cooperation of these implementing organisations was crucial for the success of the project. Ipso therefore signed a Memorandum of Understanding with the implementing NGOs defining the signatories' obligations towards the project.

Lack of suitable working space in the clinics formed a challenge that required creative solutions. In one case we bought two containers and placed them in a hospital garden. In other clinics rooms were divided with wooden walls to create the privacy required for counselling sessions.



The head of the mental health department Dr Bashir A. Sawari: „I want to take the opportunity to thank the German Foreign Office and Ipso with its committed and professional staff for their hard work which will reduce the mental burden in north Afghanistan and improve civil society through individual conflict solving, trauma work and reintegration of individuals in social activities and daily life.”

FEBRUARY

SETTING UP THE PROJECT

Ipso rented a project house in Kabul and hired a team consisting of the manager Dr. Fareshta, master trainers, administrative and finance officers, a translator, a logistics officer and a cook, as well as cleaners, drivers and guards. At the same time, Ipso signed a Memorandum of Understanding with the Ministry of Public Health and other implementing partners in the northern provinces.



The team members hired for this project had in previous years proven themselves in different working contexts, including Dr Fareshta, the team manager, who has been working with Inge Missmahl since 2004. The fact that the German Government takes mental health seriously as a precondition for peace, reconciliation and stability in Afghanistan fuelled the enthusiasm of our Afghan colleagues.

PROJECT TIMELINE

01.02.2011 - 31.12.2012

APRIL

SELECTION OF PSYCHO-SOCIAL COUNSELLOR TRAINEES

1. Job announcement for the positions of the psycho-social counsellors
2. Evaluation of CVs
3. Short-listing of candidates and invitations to a written examination and an interview
4. The Ipso team travelled to the provinces to meet the candidates for the written tests and interviews

The selection of trainee counsellors is always challenging, and we used the experience of our entire team to identify the candidates that showed the most potential and commitment to the cause. Psycho-social counselling is a demanding profession because counsellors are confronted with harrowing life stories and difficult life situations on a daily basis. The counsellors therefore need to be extremely motivated and must not be overburdened by problems of their own.

Ipso was fortunate in being able to find good candidates that included six medical doctors who wanted to be able to do more for their patients.



MAY - AUGUST

INTENSIVE TRAINING PROVIDED TO 24 PSYCHO-SOCIAL COUNSELLOR TRAINEES IN KABUL

Twenty-four men and women from the northern provinces of Balkh, Kunduz, Badachshan, Baghlan, and Takhar passed the intensive training, which lasted three months and was held six days a week from 8.30am-3.30pm.

The three pillars of the training were: Knowledge, Skills, Self-experience.

The knowledge taught in the course was always based on lessons in self-experience to ensure that counsellors base their knowledge on personal experience or observation. It was also important for the trainees to develop their ability to empathise, so that they can relate to others without unconsciously identifying with them. The importance of this aspect is illustrated by the following example:

After the first training in 2005, the counsellors worked in 15 clinics across Kabul. Many cases concerned family conflicts, but domestic violence was rarely mentioned in the counsellors' reports. Domestic violence as a minor factor seemed unlikely, and further examination revealed that the counsellors had not addressed the topic. They had even avoided it when talking to their patients because the counsellors were burdened by personal experience of domestic violence, rendering the topic too painful to address. Only after we discussed this problem with the counsellors, made them aware of their personal reactions and helped them to examine their own lives, the counsellors were able to help their patients by addressing the issue of domestic violence in their consultations.

A counsellor's self-experience is also important in regard to the social and cultural context of the individual and mental health of clients and patients because it helps to understand the social and cultural environment they live in as well as their interaction with their environment.

There is a clear connection between the common health status of an individual, especially the member of a vulnerable group such as women and children, and environmental factors such as behavioural patterns and traditional practices, the cultural context, and the consequences of an ongoing war, of violence and a deteriorating social environment. As psycho-social counsellors and medical doctors we can hardly influence the conditions our clients and patients live in, but we can encourage and support our clients and patients to try to influence these conditions for themselves. In the self-experience group we reflected on the socio-cultural conditions that have shaped the life experiences of our trainees. Listening to others in a group, including a mixed group, enables men and women to better understand each others' reactions. Deep reflection helps to understand a situation and to identify possible solutions or coping strategies. The group spent the morning together and was split into smaller groups in the afternoon. Afterwards the small groups shared their insights, followed by individual sessions for the trainees. After three months they took their first examination: a knowledge test and individual oral examinations as well as an oral examination of the group. Those who passed the exam started working in the target clinics under supervision.

The manuals for this training were developed by Inge Missmahl and her team and have constantly been improved since 2004 on the basis of performance evaluations and insights gained over time. The effectiveness of the approach has been demonstrated by a research study carried out in Mazar-i-Sharif (Ayoughi et al., 2012).



Left picture: Chargé d'affaires Dr Thomas Zahneisen, opening the Ipsos project "Mental Health in North Afghanistan" in the Ipsos training centre, Kabul.

TWO-WEEK TRAINING IN MENTAL HEALTH PROVIDED TO 14 MEDICAL DOCTORS FROM THE TARGET CLINICS

Until 2011, mental health training available to medical doctors in Afghanistan had been limited to a superficial diagnosis of depression or other mental health disorders. The trainings had been provided by NGOs or had formed part of medical training in psycho-pathology offered at Kabul Medical School.

Most of the patients coming to the clinics show somatic symptoms or symptoms of depression, fear and anxiety. Medication is used with limited success because symptoms tend to express psycho-social stressors or problems in the patients' lives. We therefore trained medical doctors to identify severe psycho-social stressors as well as direct connections between symptoms and psycho-social stressors, so that patients can be referred to psycho-social counsellors.

Medical doctors may prescribe medication in the early stages of a patient's treatment to ease symptoms or to help him or her to sleep, but usually patients show signs of improvement after a few sessions with the counsellors.



AUGUST - DECEMBER

PRACTICAL WORK OF THE PSYCHO-SOCIAL COUNSELLORS IN THE TARGET CLINICS

The psycho-social counsellors travelled back to their provinces and started to work in the target clinics. Ipso trainers visiting regularly provided supportive supervision.

A member of each provincial team was chosen to lead weekly supervision meetings usually held on a Thursday. Each counsellor was obliged to report two cases per month, in a reporting format developed by Ipso, for the case then to be discussed by the group. An Ipso supervisor usually supported the group over the phone.

Ipso's supervisors provided additional support by travelling to the provinces to be able to discuss the work of the counsellors face to face, their successes as much as difficulties with patients and the work environment of the clinics.

As teamwork between medical doctors, nurses and psycho-social counsellors at the clinics is crucial for the successful treatment of patients, Ipso provided trainings for medical doctors in psychopathology, which also aimed at creating a basic understanding of the benefits and necessity of psycho-social counselling.



IPSO PARTICIPATED IN WORLD MENTAL HEALTH DAY

Ipsu presented its work at the Ministry of Public Health.



FIRST TWO-WEEK REFRESHER TRAINING IN KABUL PROVIDED TO THE PSYCHO-SOCIAL COUNSELLORS

The trainers supervising the work of the counsellors at their workplaces together with the provincial team leaders carefully collected topics and cases that had presented counsellors with difficulties. The issues were addressed in the short intensive trainings conducted for the counsellors. The training provided an opportunity for the counsellors to meet again and to draw strength from the realization that they are not alone in the field but part of a professional community that is able to provide support.



STUDY TOUR TO TADJIKISTAN

Dr Fareshta and Dr Nemat gave a presentation on the mental health situation in Afghanistan and on the psycho-social counselling approach which has been introduced to the Afghan health system and implemented in the selected clinics through the project.



TWO-WEEK TRAINING IN MENTAL HEALTH PROVIDED TO 14 NURSES FROM THE TARGET CLINICS

NOVEMBER

DECEMBER/MARCH

FIRST FOLLOW-UP TRAINING IN MENTAL HEALTH PROVIDED TO MEDICAL DOCTORS FROM THE TARGET CLINICS



EMERGENCY COUNSELLING SERVICE FOR VICTIMS OF A SUICIDE ATTACK IN KABUL

Known for their work experience and professionalism, the psycho-social counsellors working as trainers for the project were asked by the Ministry of Public Health to counsel the survivors of a terrorist attack carried out in November 2011.

The target clinics are familiar with patients with symptoms of post-traumatic stress caused by such attacks. The insecurity these attacks generate among the population severely affects mental health and keeps causing many people traumatic experiences.

SECOND AND THIRD TWO-WEEK REFRESHER TRAINING PROVIDED TO THE PSYCHO-SOCIAL COUNSELLORS



MAY

FOUR-WEEK TRAINING PROVIDED TO TWELVE PSYCHO-SOCIAL COUNSELLORS CHOSEN AS NATIONAL MENTAL HEALTH TRAINERS

The twelve psycho-social counsellors who had performed best were trained to become national mental health trainers qualified to train psycho-social counsellors.

The low numbers of trained staff in the mental health service form a challenge for the Afghan public health system.

All BPHS clinics as well as clinics offering the Essential Package of Health Care Services need to be staffed with psycho-social counsellors, creating a demand for more than 1000 counsellors. In order to ensure that all patients can expect the same standards of care, guidelines and quality standards had to be developed for the three-month training to be provided by the national mental health trainers.



APRIL

JULY

TWO-WEEK TRAINING PROVIDED TO THE TWELVE NATIONAL MENTAL HEALTH TRAINERS QUALIFYING THEM TO TRAIN MEDICAL DOCTORS

As a result of the project, each province has two national mental health trainers for medical care, and two trainers for psycho-social counselling. The trainers are registered with the Mental Health Department of the Ministry of Public Health and are qualified to provide further training to medical doctors and to train psycho-social counsellors. Thus the extensive need for training in the provinces can be met, as well as for supervision of the counsellors and the medical doctors who have received training.



FOLLOW-UP TRAINING IN MENTAL HEALTH PROVIDED TO THE NURSES FROM THE TARGET CLINICS

FINAL EXAMINATION OF THE 24 PSYCHO-SOCIAL COUNSELLORS IN KABUL



The final examination of the psycho-social counsellors consisted of a written test, a case presentation and an oral examination. The counsellors' attitudes, knowledge, skills and ability to reflect their interactions, feelings and work were carefully observed. The counsellors who passed are qualified to work as psycho-social counsellors in the Afghan public health system.

WORKSHOP WITH COMMUNITY WORKERS, JUDGES, MOSQUE LEADERS, LAWYERS, MEDIA, A HUMAN RIGHTS COMMITTEE, EURO POL STAFF AND IPSO'S PSYCHO-SOCIAL COUNSELLORS IN MAZAR-I-SHARIF

The aim of the workshop was to create a common understanding of mental health issues among the Afghan population as well as a reference system for cases of domestic violence.

22ND DECEMBER MENTAL HEALTH STAKEHOLDER CONFERENCE FOR THE FIVE NORTHERN PROVINCES OF AFGHANISTAN

The outcome conference emphasised the need for a continuation of the mental health activities of the Afghan Ministry of Public Health. In their speeches, the public health directors expressed their appreciation for the support provided by the German Foreign Office and emphasised the benefits of the mental health component established in their clinics by the project. The national mental health trainers and the psycho-social counsellors received certificates and are now part of the registered mental health staff of the Ministry of Public Health in Kabul.



OCTOBER

IPSO PARTICIPATED IN NATIONAL MENTAL HEALTH DAY

SEPTEMBER – DECEMBER

NATIONAL MENTAL HEALTH TRAINERS STARTED PSYCHOPATHOLOGY AND PSYCHO-SOCIAL COUNSELLING CLASSES FOR MEDICAL DOCTORS IN BADAKSHAN

THE IPSO MASTER TRAINERS AND THE NATIONAL MENTAL HEALTH TRAINERS PROVIDED TRAINING TO 65 NEW TRAINEE COUNSELLORS FROM 15 PROVINCES

The example given by the German Foreign Office as a funding body for mental health care and the success of the project had motivated the EU to provide further funding for the training of medical doctors, nurses and counsellors in the remaining 29 Afghan provinces.

Ipsos was awarded the grant and, with support from the German Foreign Office, currently trains 140 counsellors from 29 provinces, 70 national mental health trainers for psycho-social counselling, and 70 national mental health trainers for medical care. By the end of 2013 all Afghan provinces will have national mental health trainers able to train the health staff needed to deliver the Basic Package of Health Care Services and the Essential Package of Health Care Services.



AFGHANISTAN IS A COUNTRY THAT HAS SEEN THREE DECADES OF WAR AND CONTINUOUS INSECURITY. IN THIS PERIOD ALL AFGHANS WERE DIRECTLY AND INDIRECTLY AFFECTED BY THE WAR AND ITS CONSEQUENCES. ANOTHER SOURCE OF PROBLEMS IS THE TRANSITION FROM A TRADITIONAL SOCIETY THAT VALUES HONOUR AND RESPECT TO A MODERN SOCIETY INFLUENCED BY MEDIA AND GLOBAL DIGITALIZATION. IN MY OPINION, THE PSYCHO-SOCIAL COUNSELLING FORMS A VITAL AND IMPORTANT APPROACH TO THE PRESENT SITUATION IN AFGHANISTAN. BEING INVOLVED IN THE PRESENT PROJECT WAS INTERESTING, MOTIVATING, MEANINGFUL AND AT THE SAME TIME CHALLENGING.

MY EXPERIENCE WITH THE MENTAL HEALTH PROJECT

Conducting trainings for psycho-social counsellors introduced me to many individuals in vastly differing life situations who were faced by a wide range of challenges. I became more and more motivated to work in this particular line of my profession because I realized that the trainings do not just allow us to make a living but present an opportunity for self-experience and to change unpleasant aspects of our lives as well as our behaviour.

When we conducted the first round of psycho-social counsellor exams in Kabul, almost all of the trainees said that in their homes they used violence against family members including their children; but after three months of training and self-experience the counsellors started to notice changes in their own behaviour and became more tolerant and understanding parents. Furthermore,

many trainees lacked self-confidence when they started the training, and I witnessed huge changes in them over time: they started to shine and show positive aspects of their personalities, and seemed to trust in their abilities to change their own lives and the lives of others.

What makes the profession of psycho-social counselling so beautiful and acceptable? It is a culturally sensitive approach that takes the values of Afghan society into account. During the trainings we as trainers have never heard anybody of the trainees say that our work is useless or does not respect Afghan culture. Quite to the contrary, patients, clinic staff and our psycho-social counsellors recognize the need for such a service and point out the amazing contribution that counselling makes to individual lives, families and

entire communities.

We also received a lot of feedback from medical doctors and nurses who attended the mental health training by IPSO. I remember one of the medical doctors working in a clinic in Kunduz saying: "I have attended many trainings but this is the first one that makes you feel like a real human in the process, which I do enjoy very much!" Afterwards, he worked really closely with our psycho-social counsellors and they treated a lot of cases successfully.

Providing counsel to clients by training psycho-social counsellors working in health facilities of the northern provinces was a great opportunity for those, including myself, who wanted to contribute to peace and reconciliation in Afghanistan because we could help:





Fareshta Queedes has been working in the field of psycho-social support since 2004 and manages the project "Mental health in northern Afghanistan" as head of the Ipso office in Afghanistan.

- » Many people who could not cope with ongoing difficulties and conflicts within their families
- » Many young men who were suffering from the consequences of unemployment
- » Many mothers who were so desperate that they started to beat their children, who present the future of Afghanistan
- » Many returnees from Pakistan or Iran who had lost their motivation for life when facing huge difficulties in their home country
- » Many women suffering from shameful experiences which they did not dare to share with anybody else
- » Many people who wanted to attempt, or had attempted suicide because they did not see any other way out of overwhelming life situations
- » Fathers who felt ambivalent about

marrying their daughters or sons by force

One of our psycho-social counsellors said something that was very important and meaningful to me: „I counselled many clients, and at the beginning of most sessions I thought that counselling couldn't help the clients to solve their problems. But after twenty minutes I changed my mind as we discovered a source of hope and love in their lives. Behind those depressed and anxious faces I discovered many very courageous personalities ready to face the challenges in their lives and to learn from their experiences in order to confront the reality of the present and to recover the beauty of life. The counselling process helped them to discover these aspects, and they were able to bravely take care of their lives”.

This shows that although mental health and psycho-social counselling formally are part of the health sector, they are more than that: they are a cross-cutting issue!

Finally, I would like to say that ignoring mental health in Afghanistan is ignoring or not caring about peace and the future of Afghanistan. Therefore, I would like to express my appreciation for the German Government, which truly understood the situation in Afghanistan and supported the Afghan people and the government by implementing mental health projects. To me it is very evident that Afghanistan will never become peaceful if people do not receive help to overcome their painful personal experiences during times of war and conflict. **Fareshta Queedes** . Projectmanager



Sarah Ayoughi (left) is psychologist and researcher in the field of mental health. She joined Ipsos in 2008 and provides technical and managerial support to Ipsos projects in Afghanistan.

The results of the research project in Mazar-e-Sharif confirmed observations statistically documented over a period of six years of counselling practice (2005-2010) in Kabul, Herat, Bamyan and Mazar-e-Sharif. It had become obvious that many Afghan families were rendered at least partially dysfunctional due to continued stress, exposure to traumatising events, loss of beloved ones, homes and jobs, and poverty-related suffering. These factors have had profound effects on the mental health status of the Afghan population. As documented in the study, levels of mental health-related problems have been extremely high in Afghanistan. The interviewed women suffered from symptoms of depression, anxiety and posttraumatic stress in particular, and

were exposed to daily stressors such as poverty, insecurity, family conflicts and domestic violence experienced as overwhelming and almost insurmountable. The combination of already existing mental health problems, daily stressors and demanding living conditions puts an exceptionally high burden on Afghans. The mental health problems are experienced as disabling and have serious social consequences such as stigmatisation, exclusion, distortion of the family system and an increase in domestic violence. A low threshold for violence against family members is a commonly observed phenomenon in contemporary Afghan society. Some of our study participants reported that even the harmless fighting of children irritated them and made them lose their

temper. Such incidents serve as a starting point for domestic violence often deeply regretted afterwards. The behavioural pattern could be observed not only in men but also in women and even children. We believe such overreactions are prompted by constant high levels of stress.

To sum up, mental health symptoms such as hyperarousal cause a behaviour which has the potential to substantially change family interaction and other social relationships, leading to problems including social isolation, drug abuse, community conflicts and domestic violence. These problems often have a strong negative impact on the developmental perspectives of children and adolescents, inducing a feeling of not

IN 2010 IPSO CONDUCTED A RESEARCH STUDY IN NORTHERN AFGHANISTAN INVESTIGATING THE EFFICACY OF A PSYCHO-SOCIAL COUNSELLING APPROACH DEVELOPED BY INGE MISSMAHL AND HER TEAM, AND RECENTLY INTEGRATED INTO THE AFGHAN PUBLIC HEALTH SYSTEM [AYOUGHI, S., MISSMAHL, I., WEIERSTALL, R., & ELBERT, T. (2012). PROVISION OF MENTAL HEALTH SERVICES IN RESOURCE-POOR SETTINGS: A RANDOMISED TRIAL COMPARING COUNSELLING WITH ROUTINE MEDICAL TREATMENT IN NORTH AFGHANISTAN (MAZAR-E-SHARIF).

THE SUCCESS OF PSYCHO-SOCIAL COUNSELLING IN AFGHANISTAN

being able to shape one's own life, and amplifying the perception of cultural identity loss. Despite a strong need, mental health services were practically non-existent in Afghanistan, especially in rural provinces. Health staff lacked awareness, knowledge and treatment options regarding mental health issues. The study demonstrated that local physicians did not have access to information on psycho-social stressors causing mental health problems which would have allowed them to improve their treatment of mental health patients. The physicians were not trained to develop proper treatment plans for patients suffering from mental health symptoms and problems. Psycho-somatic symptoms and symptoms of depression and anxiety were frequently

dealt with by prescribing available medication such as sleeping pills and pain killers, which neither offered relief from a particular situation nor helped to get to the root of a problem (see the study results). Even in cases in which psychopharmacological treatment may have eased the symptoms for a certain time, the underlying psycho-social stressors remained unexplored.

The symptoms of women suffering from depression and anxiety who had, in contrast, benefited from four to eight counselling sessions with our trained psycho-social counsellors showed vast signs of improvement. In addition, they reported a reduction of psycho-social stressors and improved coping strategies.

In sum, the research study demonstrates that support to the Afghan health system plays a vital role in rebuilding civil society. Access to a qualified and substantial mental health service can help individuals to regain psychological functioning, to cope with painful experiences and, as a result, to establish healthy relationships within the family, the community and society. This forms a precondition for peace and reconciliation, and the rebuilding of civil society in Afghanistan.

Sarah Ayoughi

ONE DAY IN SPRING I WAS SITTING IN MY ROOM WHEN SUDDENLY I HEARD SOMEONE CRYING OUTSIDE. A YOUNG ADOLESCENT WITH HER MOTHER ENTERED. THE MOTHER WAS LOOKING UPSET AND THE GIRL WAS CRYING LOUDLY.

FEMALE EXPERIENCES WITH COUNSELLING

I asked them to have a seat. They sat but the girl was restless; skinny with a pale face. I felt that she was very disturbed by a problem. Her mother started talking about her daughter's situation. She said: "My daughter doesn't tell me anything about her problems. She just complains about headaches and stomach ache. I asked her many times to go to the hospital to have a check-up but she refuses". The girl was sitting next to me and was crying. She seemed very tired, her body was shaking and she avoided looking at me. Her mother also said that for a few days her daughter had not been eating. I asked her mother to relax and to kindly leave me alone with her daughter. When I was alone with the girl I promised her confidentiality. She turned her face to me and said:

"I'm 20 years old and a university student of law. We are a big family: 3 brothers and 2 sisters". She added: "Last year when I was going to preparation

courses for the entrance examination I started to like my teacher. And every day I was feeling that he also loved me". When she was talking about the boy, she was crying and couldn't talk clearly. She said her main problem was that her father did not want her to marry him, because his family was poor. We talked about her plans for the future, and she relaxed. We agreed to continue our conversation, and she was hopeful that through our talks she would be able to find a solution for her problem. At that point her mother knocked on the door and came into the room. She looked happy and I saw a nice smile on her face. She turned her face to her daughter and said: "It's great that you are not crying anymore". The girl was looking at me with an innocent and trustful face. She came back for several sessions. During these sessions she found out that her studies were very important to her and that her greatest ambition was to finish her studies and to become

a lawyer. This she would not be able to do if she got married. We also discussed the importance of learning more about the man with whom she would share her whole life. She also realized that she would want to come to an agreement with her family and decided to postpone the idea of marrying for a while. After some sessions she concentrated on her studies again and started to eat and became healthy and happy. Then she was also able to discuss the issue of marriage with her mother and father, and they agreed that they would not marry her off before she completed her university studies. In the last session the young woman was really happy and I could see happiness in her eyes and her smile. This motivated me to put all my efforts into being a good psycho-social counsellor, and I was very happy that as a part of Afghan society I am able to provide services to people and to put smiles on their faces.

Nafisa Temori

Nafisa Temori is a psycho-social counsellor trained by Ipsos. She had worked in a target clinic in Herat before she became a national mental health trainer, and was recently involved in the training Ipsos provides for psycho-social counsellors.



IPSO MISSION STATEMENT



The Ipsos team in the training center of Kabul.

We wish to contribute that the people of our world are conscious, creative, taking responsibility for themselves and their environment; proud to be who they are, reaching out in dialogue relating to the others and the world – passionate – curious – empathetic.

With our professional, creative and committed team we provide services, awareness and training for psychosocial counsellors and mental health staff.

We encourage cultural expression and reflection.

We help to care.

Support the health system enabling all people in Afghanistan to have equal access to high quality psychosocial and mental health care.

Accountability, transparency, freedom of expression, equal rights, peace and reconciliation on a personal and collective level are our guiding principles.

“At the end I would say, we need a huge campaign to raise awareness all over Afghanistan for the benefit of psycho-social counselling!”

“I understood that we should not let life just pass by like day and night. Maybe our life in Afghanistan is full of sorrow; but also full of happiness! I learned to live with both – and I enjoy it!”

“In the past I felt as being a victimized person but today I am very happy as I learned how to influence my own life.”

“I love this job very much and when I will get married I will continue my profession as it is part of my life now.”

“Our patients always told us that they had received a lot of medication from their doctor, but after taking it never felt better or healthy. Now after talking to us in the counselling sessions they feel better and have hope to become healthy again.”

STATEMENTS OF OUR PSYC



“Understanding my values and personality and finding solutions for my own problems motivated me to believe in this profession.”

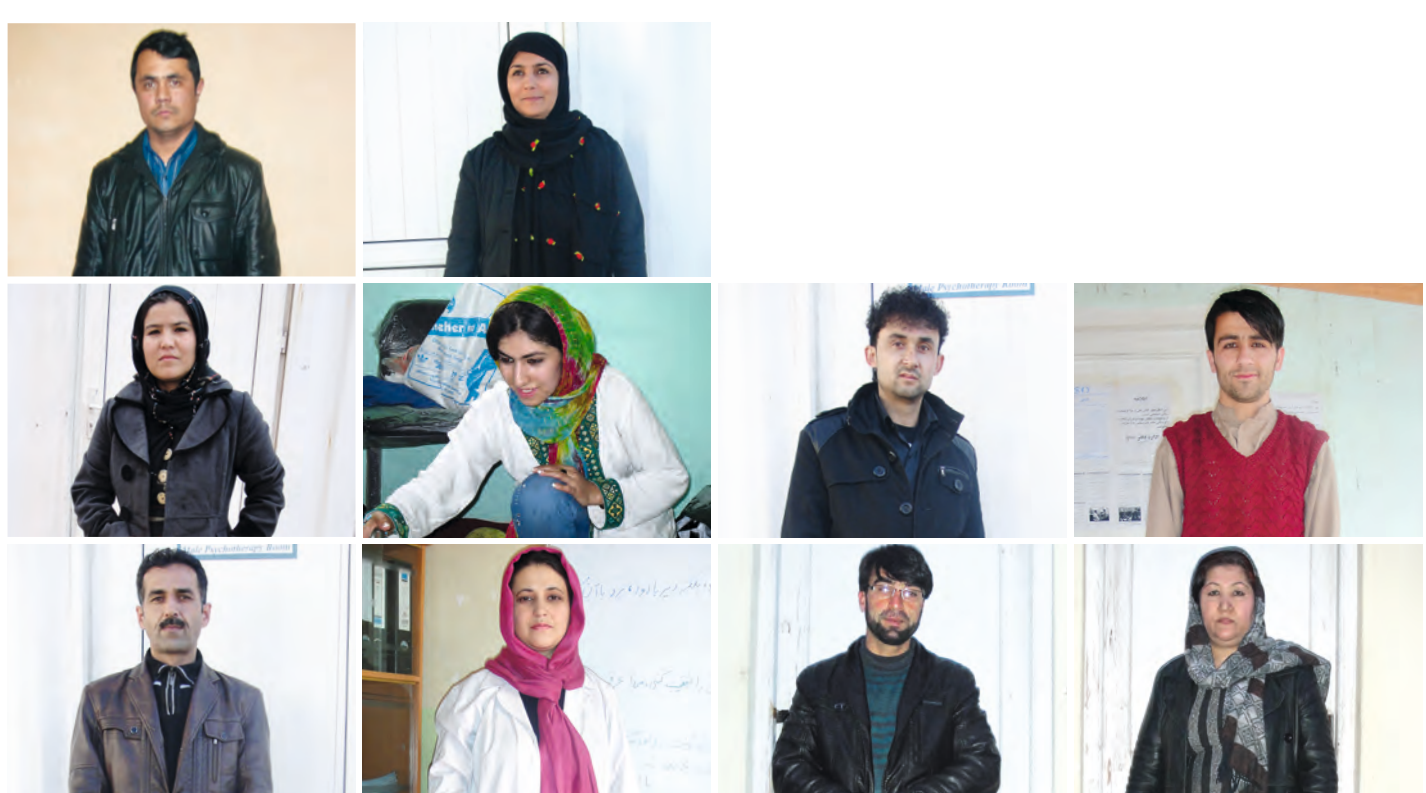
“This profession enhanced not only my knowledge but also my understanding for the difficult life circumstances of the people of our country. And it gave me the tools to help Afghan men and women to overcome the suffering and to find ways how to solve conflicts and improve the relationships in their families.”

“Every day, before we open the doors of our counseling centre, I take a deep breath and receive inspiration and energy; then I start the day.”

“Counselling is not only a profession. It is decision for life and changes your whole way of coping with problems and difficulties: This is a good challenge.”

HOSOCIAL COUNSELLORS

“IT MAKES ME HAPPY TO BRING A SMILE IN THE PEOPLE’S FACES.”



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International Psychosocial Organisation

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Purpose:

Ipsos is specialized in the field of mental health and psychosocial care, in developing locally adapted concepts, delivering trainings for psychosocial counsellors, medical doctors, nurses and community health workers for treating mental health-related problems including depression, anxiety and posttraumatic stress following war, insecurity and challenging living conditions.

Furthermore, it aims at strengthening the cultural identity of war-torn societies through cultural programmes, which is a precondition for peace and reconciliation, and the rebuilding of civil society in the aftermath of a civil war and natural catastrophes.

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