Delivering psychosocial support to most vulnerable refugee groups through community outreaches

TPO Uganda is kick starting vital psychosocial support programmes to vulnerable populations and refugees in South Sudan. The Recovery, Response, Resilience, Readiness and Opportunity Project (R4O), funded by EU humanitarian aid, women and children in the settlements of Alere, Ayilo I and Ayilo II in the Adjumani district are identified as beneficiaries and provided with a range of support services. The specific activities being implemented include mobilizing community members to participate in psychosocial support awareness activities, screening beneficiaries for mental health and psychosocial support needs, and providing treatment through cognitive behavioural therapy. Cognitive Behavioural Therapy was adapted from the WHO Mental Health Gap Guidelines for mental health and psychosocial support in humanitarian settings. It uses group therapy to strengthen individual and peer healing.

In the R4O Project, TPO Uganda organizes community outreach activities to extend information and other mental health and psychosocial support services to the most marginalized community members. These services are delivered in collaboration with other implementing partners and existing community support structures such as refugee welfare committee members, child protection committee members and village health teams. Community outreaches largely benefit the most underserved individuals within society such as people with disability, children and the elderly. They also directly benefit others facing poverty and mental health and psychosocial support challenges. Through conducting community outreaches with vulnerable groups, TPO Uganda removes geographical and financial barriers that often hinder access to and utilization of mental health and psychosocial support.

In the R4O Project, TPO Uganda runs dynamic community outreach activities, designed to extend information, mental health and psychosocial support services. These activities provide support for the most marginalized community members across South Sudan. They are delivered in collaboration with other implementing partners and existing community support structures such as refugee welfare, child protection committee members and village health teams. The key individuals who benefit most from these community outreaches are those with disability, children, the elderly and others affected by poverty. By extending these services, TPO Uganda removes geographical and financial cost barriers that often hinder access to and utilization of mental health and psychosocial support. This write up shares the story of one of our child beneficiaries, to showcase the greater impact of psychosocial support, made possible through community outreaches.

Alex (not real name) is an eight-year-old boy, living in Adjumani town and a beneficiary of TPO Uganda’s psychosocial support interventions under the R4O project. Alex was first put into contact with a TPO Uganda Social Worker through a referral by one of the community-based organisations named “I am Peace”. At the point of referral, the social workers learnt from Alex’s mother, also named Maria, that he suffers from severe epilepsy with
4-6 fits a day and an average of 3 per night. He sustained several injuries all over his body and head as a result of continued falling from the fits.

“...it is these circumstances that affected any attempts to enrol Alex into school. His situation worries me so much all the time. I am a widow and unable to leave him alone to try and find any work”, explained Maria during her first interaction with the TPO Uganda Social Worker during one of the community outreaches.

TPO Uganda arranged for Alex to meet a Psychiatric consultant who was training health workers in Adjumani district. As his mother is a widow with no income source, TPO Uganda intervened by procuring 2-weeks medication for Alex. The medication significantly reduced the frequency of Alex’s fits to one per day and in some instances, he would experience none at all. The TPO Uganda Clinical Psychologist is continuing to monitor Alex’s situation and provide care where needed. He also sensitized Maria on how she could support Alex, helping him stick to his medication programme through continuous reminders and check-ups. During the monitoring visit by the Clinical Psychologist, Maria shared that, as advised, she was also making a conscious effort to provide regular meals. She communicated that her son had not had a fit since following the treatment.

“...he has not had a fit in three weeks since he started taking the medication and now he can play with other children without falling and being laughed at. I am so happy to see him run around and enjoy a normal life. I plan on sending him to school when he fully recovers. That way, I will be able to find an income generating activity without worrying about leaving him behind,” explained Maria.