As part of his treatment a displaced boy sculpts a replica of his house which was damaged in Saada governorate. 10 October 2016 – 13-year-old Mohannad was playing with his friend and brother in Taiz City when a mortar shell landed nearby. Suddenly, his carefree days were turned into days of pain. Mohannad lost his brother in this attack. His friend was blinded and lost his leg. Mohannad suffered extensive burns and was transferred to Sana’a for surgery. All of this leaves this explosion resonating in this young boy’s mind. Previously cheerful and sociable, Mohannad became an introvert and a shadow of his former self.

To support his recovery Mohannad was referred to the mental health and psychosocial care unit at Al Jumhouri hospital in Sana’a, where he went through rehabilitation sessions to help him cope and continue a normal life. The 9 months of treatment were conducted by a team trained by WHO, made up of a primary health care doctor, a psychologist and a volunteer health worker. The treatment began with psychological first aid 2 weeks after the traumatizing event.

Psychological rehabilitation then moved on to narrative exposure therapy, where Mohannad was able to recount his story and draw the events. The team then employed eye movement and desensitization recovery, a process used to move Mohannad towards his recovery as part of his psychological debriefing.

After his care, Mohannad was able to return to school. He used his experience and the recovery mechanisms he had learnt to help his friends, who used them to start their own journey of recovery.
Mohannad’s story represents just one in a country where many people are suffering from the psychological impact of war. For 12-year-old Dhia Khaled, the sound of massive explosions in Faj Attan district of Sa’ana have left him inconsolable and wanting to take his own life. Yehia Al-Fatemi from Dhamar governorate has been diagnosed with severe depression after returning to his house to find the charred bodies of his wife, son and 2 daughters, killed by an unexpected airstrike. The people and their stories keep coming.

Dr Mohammed Al-Kholaidi, a mental health specialist based in Sana’a, notes the increasing numbers of patients coming to him for care. He reports seeing a population suffering from anxiety, depression, insomnia, and obsessive compulsive disorder. All of these are symptoms of post-traumatic stress disorder.

Mental health and psychosocial support is a crucial component in health service delivery especially during ongoing conflict. However, with only 40 psychiatrists in the country, WHO is leading the integration of mental health and psychosocial care into the Yemen primary health care system. In cooperation with the Ministry of Public Health, WHO has so far conducted 2 workshop courses for 60 psychologists and primary health care workers from the severely conflict-affected Sana’a, Tazi, Dhamar and Amran governorates. On providing psychosocial support for crisis victims. WHO's strategic goal is to train 200 health and community workers from all governorates to qualify them to respond to the needs of this vital component of primary health care.

“Mental health is usually ignored in terms of prioritizing health in a poor country. People with pre-existing mental problems become more vulnerable due to displacement, abandonment and lack of access to mental health services,” said Dr Abdel Basit Merghani, mental health and psychosocial support officer for WHO Yemen. "WHO will keep utilizing the available community resources to become more active and reach a significant percent of population who are in need of psychosocial support."

Related link

World Mental Health Day: Psychological First Aid, 10 October 2016

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