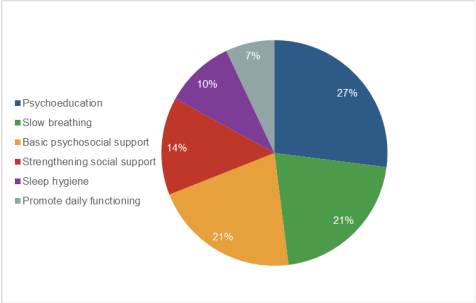
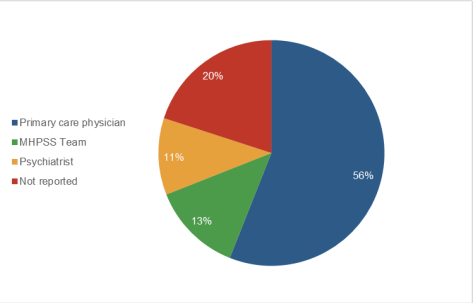
Newsletter 55, dated 23rd July 2026

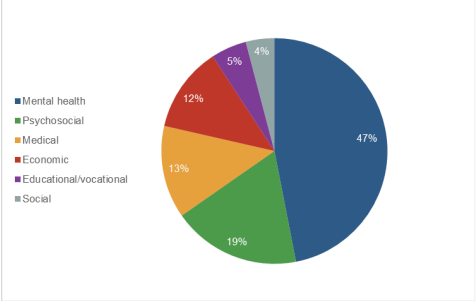
Khyber Pakhtunkhwa: Outcome of the MHPSS pilot implementation - IV

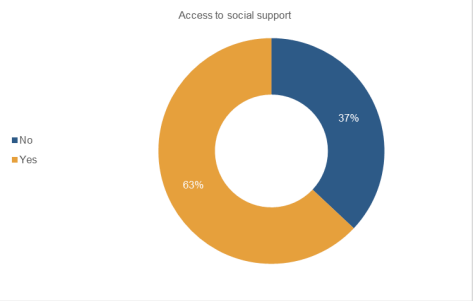
All cases referred by the Hamdard Force from the community were assigned to the clinical psychologists through their dashboards on the MHPSS portal. The clinical psychologists, also trained in implementing mhGAP-Humanitarian Intervention guidelines, managed stress-related conditions and provided psychosocial interventions for other mental health conditions at Tier 2. They directed 277 cases to the MyCare+ mobile application. This application is part of the MHPSS service model, hybrid in approach and designed as a scalable intervention for stress management.

In addition to attending weekly supervision meetings, they were able to seek supervision from the MHPSS team through the MHPSS portal. They were also connected to the trained primary care physicians in their respective districts on WhatsApp groups; and had access to the directory of local services.

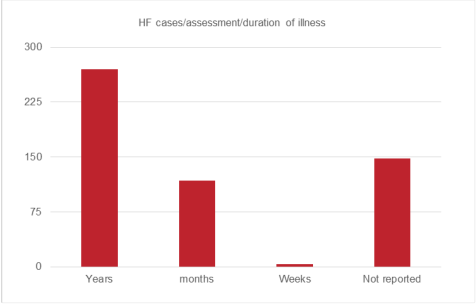


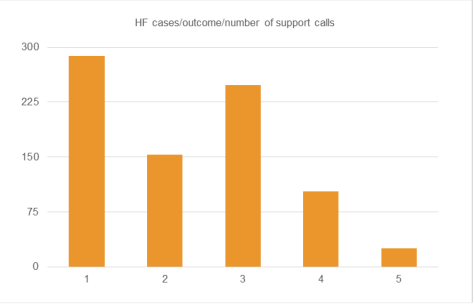






- As part of the assessment process, MHPSS needs were identified. Almost half of the referrals needed to be evaluated for a mental health condition; followed by needs for psychosocial, medical, economic, educational and social services.
- Two-thirds of the cases reported that they do not have social support.
- In more than 70% of the cases, individuals had been unwell for months or years.
- Clinical psychologists often followed up on their cases, sometimes as many as five times.
- 280 service users were further referred to the trained primary care physicians in the respective districts, MHPSS team, or local specialists, demonstrating the pathway to care during implementation.





Mental Health Strategic Planning & Coordination Unit