



**THEHOPE**  
**Community Engagement**  
**&**  
**Patient and Public Involvement and**  
**Engagement (PPIE) Activities**

*Report By*  
**THEHOPE Field Team**

**THEHOPE is not just a research project,**  
*it is a Cause for us.*

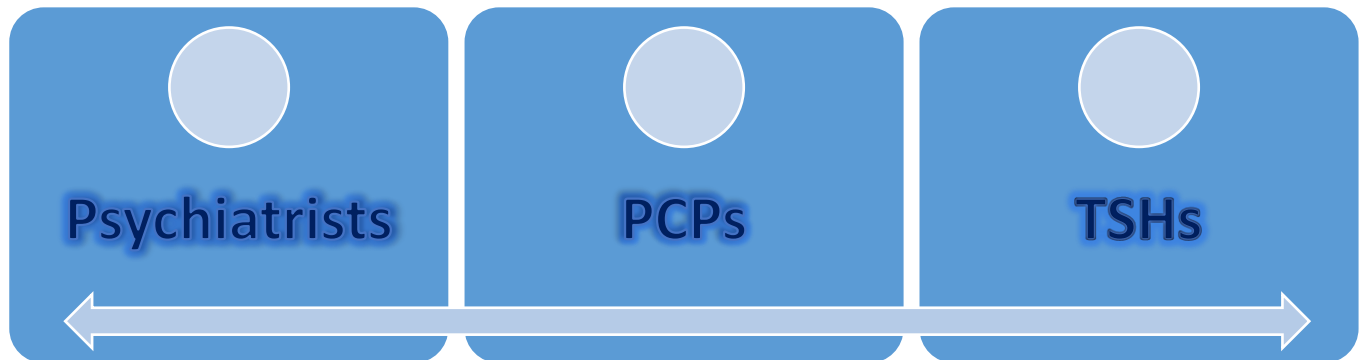
*THEHOPE Research Team*

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## **Executive Summary**

The HOPE is a 30-month feasibility study funded by the MRC (Medical Research Council). It aims to develop an intervention to involve Traditional and spiritual healers (TSH) working collaboratively with Primary Care Practitioners (PCPs) for early identification, referral, and management of First Episode Psychosis (FEP) in adolescents in Khyber Pakhtunkhwa KPK, Pakistan to help to prevent long-term consequences of untreated psychosis. An extensive community engagement campaign was a crucial component of THEHOPE program to raise mental health awareness in young people and various stakeholders across KPK. Community engagement activities in The HOPE has spanned over three phases: Psychosis awareness among the general community (10 sessions), meetings with Traditional Healers and field trips (multiple visits to TSH practices) and Mental Health Awareness sessions among the general community. In addition a Lived Experience Advisory Panel (LEAP) has been established to ensure that personal experiences of patients, public and members of community are listened to and accounted for in this project.



## **OBJECTIVES (THEHOPE)**

- *To develop a culturally appropriate intervention for early identification, referral and management of FEP with key stakeholders.*
- *To investigate the acceptability of task sharing and training procedure, and to establish pathways for referral and management of FEP in consultation with all stakeholders.*
- *To establish the feasibility and acceptability of involving mental health service users in training and feasibility.*
- *To evaluate the acceptability and feasibility of The Hope in terms of*
- *changes in knowledge and referral to mental health services by TSH and users satisfaction.*
- *To estimate the parameters (eg, recruitment and retention rates), means and standard deviations of the key outcome measures to benchmark potential outcome measures and enable sample size calculations for future pragmatic randomized controlled trials (RCTs).*
- *To assess the best methods for implementing and evaluating the intervention in the healthcare system.*

## Importance of Community Engagement and Involvement

Community engagement and involvement has always been an important component in all kind of research based disciplines. Community engagement plays an important role in THEHOPE research project influencing the behavior of stakeholders in order to implement project. It is based on the interaction with the target group of the research. The purpose of engaging and involving community in THEHOPE research project was to better understand and appreciate their experience and views regarding the mental health issues prevailing in society, for the future of a well informed community.

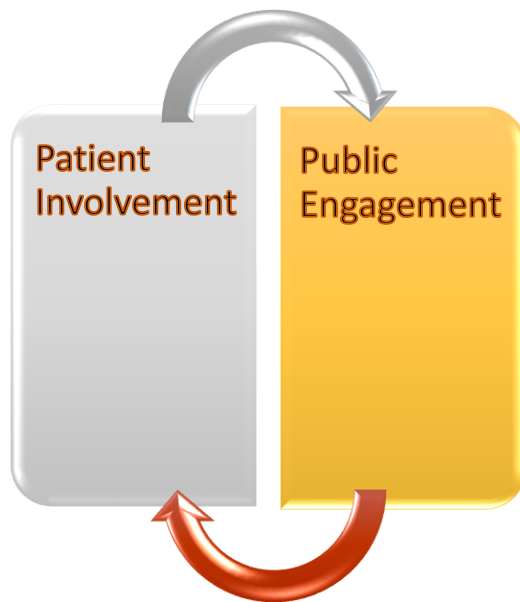




# **Patient and Public Involvement and Engagement**

Patient and public involvement and engagement is argued to be an effective way of conducting research in medical sciences. This suggests working collaboratively with patients, public and community to conduct a study aimed at improving the relevancy of research. The purpose of including public and patients in THEHOPE research project was to benefit both the parties in long term for effective results. It is an active and constant collaboration throughout the research between patients, the community/public and the researches. The personal and first hand experience of the patients as key stakeholders in research helps to conduct the study in a more effective way.

Patient and public involvement and engagement in THEHOPE reseatch helps to provide valuable information from the lived experience of the persons. This can lead to productive results in Mental Health research studies.



**An active partnership between patients/the community/the public and researchers.**

***Members offer their unique insights, advice and experiences of health and care.***

***Members become a part of the research team, working with researchers to design and run the study.***

***This improves the quality, relevance and effectiveness of research***



## **Benefits of involving Lived Experience Advisory Panel (LEAP)**

- ✓ LEAP means that people with personal experiences of conditions are listened to and accounted for in research projects.
- ✓ By getting involved in research, patient public and community members can help make research more relevant and useful to patients, carers and the public.
- ✓ By working with researchers, patients public and community can improve research and therefore could make a difference to the way health and care is provided in the future.



## **THEHOPE Lived Experience Advisory Panel LEAP:**

Members from public and community with lived experience psychosis as a patient/service user or carer were selected by the field team of THE HOPE project. The basic purpose of the LEAP is to promote the active cooperation between the community, general public and the researchers. The LEAP members worked closely with The HOPE team to provide input on various aspects of the study based on their unique lived experience as patient, carer or member of the community. Their feedback, suggestions increases the quality and effectiveness of the research. The reason of involving LEAP members is having the relevant lived experiences with patients and carers.

Involvement of LEAP members was not only beneficial for the research team, it also provided platform for the members who were keen to get involved to share their lived experience of Psychosis as a patient or carer. They wanted to share the experience of challenges they faces and interestd to do something for the betterment of other people in the similar situation. The panel had regularly meetings with the research team throught the project to share their views and provide their valuable input on study materials, trial processes and staretgies for engagement of wider communities.o

### **Obstacles/barriers in engaging LEAP members:**

Initially known as the Laymen Group, the group was later renamed the LEAP Group due to various complexities. To engage a diverse group of LEAP members, including a significant number of women, the team identified and selected individuals from various backgrounds: three educated individuals, two traditional and spiritual healers, a farmer, primary school teacher, a

security guard, and three women from diverse backgrounds. During the initial meeting, several challenges arose. Some individuals expressed concerns about video recordings & pictures, while others were uncomfortable interacting with women in a mix-gender setting sittings. Additionally, individuals with lower levels of education faced language barriers and felt uneasy participating in discussions. As a result, a few members withdrew /appologise from the LEAP group, citing these concerns. To address these challenges, the team adjusted its strategy and engaged a new group of individuals who were more comfortable and willing to participate. For future initiatives, it is recommended to explore alternative strategies to engage a diverse group of individuals and ensure a more inclusive and supportive environment.

### **Selection of LEAP members:**

Following an extensive process of consultaion with Dr. Jalil (Lead THEHOPE research project) LEAP members were identified and selected with the criteria of having previous history or experience with mental health specifically psychosis as patients or care giver.

### **Training of LEAP members:**

The HOPE team in collaboration with the Impact Accelerator Unit at Keele University arranged two comprehensive training sessions on April 13 and May 24, 2023 respectively. The aim of these activities was to familiarize the research team with the core concepts of PPIE, good research practices, barriers and facilitators to PPIE, setting up PPIE group, and evaluating and reporting PPIE. The training session was facilitated by Adele Higginbottom, PPIE Project Officer and Alice Moulton, Post-Doctoral Researcher, Knowledge Mobilization, Research Fellow, Impact Accelerator Unit, Keele University, UK.

In addition a specific training module has been developed by the Keele team specifically for the LEAP members to brief them about the importance to include people with lived experience in clinical research and their roles and repsonsibilites. The KMU research team and members of LEAP were trained on this module and followed up by the project manager and filed team lead based at the KMU.

## **LEAP Members:**

**1. Member 1,**

IT expert and carer for family members with severe mental illness.

**2. Member 2, (Ph.D)**

Social sciences expert with a PhD in Sociology and carer of patient with severe mental illness.

**3. Member 3,**

A spiritual healer working in the community for over 18 years and a large following in the community. This member of the LAEP group works with patients experiencing Psychosis on a daily basis.

**4. Member 4**

A recovered patient now working independently as an accountant.

**5. Member 5**

Carer of patient with severe mental health illness.

## 1. Member 1

Member 1 is an IT expert. As a caretaker of his brother who suffered from the psychosis for 14 year. He shares the whole process of his brothers diagnosis and delayed treatment. He elaborated that it was very emotional and hard for him to hear about the mental illness of his beloved brother. According to him his brother has been having symptoms of psychosis for 14 years but he was hiding it from the family. The family was unable to understand what he was going through. When he disclosed his illness to the family they also wanted to keep it a secret from others. They have been dealing with this for years now When member 1 came to know about the condition, it had a toll on his mental wellbeing as well. He was working abroad at that time, but he had to compromise his career to take care of his younger brother as full time carer to provide all the support that he can to help his brother libe a normal and productive life. He took his brother to various medical doctors and psychiatrists. andlooked after his treatment and medication himself . He was so delighted to say that with the grace of Almighty his brother is fine now and looking after his career.

Member 1, stressed the importance of people's awareness of the signs and symptoms related to mental health issues. He highlighted the fact that the prevalence of mental health issues has increased due to various reasons and it is necessary for the general public to have knowledge about mental health to ensure early detection and appropriate treatment.

He shared his family's struggle with mental health issues and how emphasized the important of mental health illness specifically psychosis, for general public to be aware of the signs and symptoms. He emphasized the significance of early intervention and how ignoring such issues could have a long-lasting impact on the whole family. According to him after his brother's condition even his mother went through psychosis, but timely intervention helped her recover on time. He suggested that the project team should initiate a public awareness campaign on mental disorders so that patients can identify their issues and seek timely help. Thesetraumatic incidents and illnesses,haveleft long lasting effects on his family life.

## 2. Member 2

Member 2 is the Social Sciences expert and having Ph.D degree in Sociology and occupies a prominent position in a higher educational institute. He shared his experience of taking care of his younger brother, who was suffering from Psychosis at the age of 24. He recalls that his brother was a medical technician by profession and was an active and fit young boy who love his work and profession. However, due to his abnormal behavior and misbehave with family members, he realized that he was suffering from a mental illness. Initially, they took him to various places, but unfortunately, they did not see any improvement. Being an educated person he understood that he is under some stress or mental illness.

According to member 2 they were not familiar with the symptoms of mental illness, and initially, his mother and other household member thought that his brother might be under the influence of an evil spirit. They took him to a traditional spiritual healer, but there was no improvement in his condition. Despite their growing concern, they were reluctant to seek medical help due to societal pressure and the misconception that it would be too costly. After a lot of effort, member 2 managed to and convince his family member to take brother to the concern psychiatrist.

Finally, they decided to take him to a psychiatrist, but unfortunately, the journey of getting mental health treatment began quite late. Member 2 shared that although his younger brother has shown significant improvement with medication, but he decided to not take the medicines anymore which triggered his symptoms again leading to significant difficulties for him and his family. They suffered social, professional, and financial burdens due to patient's illness and care. His brother became more aggressive and resistant. On investigation his brother disclosed that he left the medication for few weeks which resulted in his aggressive condition.

Member 2 emphasizes the importance of mass awareness and timely treatment of mental health problems in youth, especially in societies where there is a general lack of awareness. He shared that being literate he has awareness about mental health but still he faced so much resistance within family and social pressure regarding treatment of mental health. He believes that the general public should know the difference between mental and spiritual issues so that timely intervention can be

given to patients with psychotic symptoms and other psychological and mental diseases. Member 2 believes that if his brother had completed early treatment course, they could have avoided the trauma they faced as a family.. There should be no negligence from family in treatment and medication.

### **3. Member 3**

Member 3 practices spiritual healing since 15-20 years. He also runs a small business. he shared his experience with the patients with psychotic symptoms. He faces many challenges as there is a lack of awareness among general public regarding evil spirits or mental illness. According to member 3, it is important for spiritual healers to know the symptoms and treatment of mental illness so that they can help their patients. He believes that there should be centers and pathways where spiritual healers can play a role in treating mental health problems.

He admitted that being spiritual healer he was not aware of such disease and illness. When he came to know he realized that large number of his patients are suffering from mental illness and they require to refer to psychiatrist to get timely treatment. He stated that he studied about this and started referring patients to psychiatrist as such cases were not affected by evil spirits but they need psychiatric treatment.

He also shared his experience in dealing with patients who are not aware of the importance of consulting a psychiatrist along with a spiritual healer. Initially when he started referring patients he faced resistance and negative feedback from people but he make them understand that they also need to visit a psychiatrist. Many people believe that psychiatric treatment is not effective or that it takes too much time. He stresses that there should be a setup where spiritual healers and psychiatrists can work together to help tackle this issue. The program should target female colleges and universities because more female patients are being referred to spiritual healers these days. He has witnessed high ration of prevalence of mental health illness among females rather than males. However, only a small number of female patients make it to proper treatment due to the stigma related to mental health diseases. Being the Pashtun society the stigma is very strong specifically with females which results in no or delayed treatment. Therefore, a massive awareness program should be initiated to address this issue.

#### 4. Member 4.

Member 4 is a lecturer and having M.Phil. degree in her credit. She is a carer of her husband who suffered from severe mental illness of psychosis. She shared her ordeal “How would one feel when a loving and caring husband suddenly starts yelling at you and then beating you up. I thought someone was doing some black magic on us, or may be its an evil eye”. Things got worse when he started hitting others when is he angry and beating family members as well his own kids. Shee had no knowledge about psychosis or mental health illness till then ande went to spiritual healers to do something about it. With the passage of time we kept on visiting different spiritual healers across various areas but didn’t find any improvement in his condition. Shee used to cry so much and didn’t know what to do. After few months someone suggested to see a psychiatrist. But she was not satisfied with the psychiatrist as she felt shewasn’t listened properly. Her husband literally disowned her.

But she continued his treatment from spiritual healers. They listened and sheused to share her pain with them, and that’s why she preferred their treatment. She used to sit on prayer mate (jainimaz) and cry so much to my Allah as no one was there for her. People were distant from her, her husband, and her family. Finally, they visited the famous psychiatrist. He took history properly and had a detailed discussion with the patient. they felt satisfied with his way of dealing with them The patient has shown a lot of improvement. Member 4 strongly suggested that spreading awareness and planning is needed about how can we reduce the stigma related to mental health issues.

She further elaborated the challenges that she faced during the period of her husband’s illness, ‘It was very tough to bear social stigma and social pressure being a carer and caretaker of psychosis patient specially when he is your husband. I came through various taunts and social pressure to handle. The time when we were going through medical treatment my social life was also badly compromised. Even now though he has recovered I have to face people interrogating me about his condition. This in turn had adverseeffect on my self-confidence too. Still I feel like I am under the effect of that situation. Still when I recall those days I get shattered’



## **5. Member 5.**

Member 5 is a chartered accountant by profession, who suffered from psychosis himself and is now on the path to recovery. He shared his experience, saying that his mental instability made his life very challenging. He said “ It was not in my control, I have started doubting everyone and everything. I became aggressive and was unable control my anger”. Due to this illness, people judged his abilities and started distancing themselves from him in office, society and family while resulted his condition more worsen. This also affected his professional life and put his career in jeopardy. Initially, he concealed his symptoms, fearing that people would misunderstand him. He dealt with those days alone but he became worse with time. He visited many spiritual healers but there was no improvement. Unfortunately, the societal reaction and people’s distancing from him led him towards mental disorders. Eventually, he reached a point where he could no longer hide his disease. He had no knowledge that timely intervention could have helped him. Even now that he is recovering, he still faces obstacles in his profession due to his history as a psychotic person. It was a very bad experience for him. He visited many TSHs but finally a friend guided him to a psychiatrist to have a checkup. Now he is living a normal life but still under treatment. Member 5 mentioned that he regret the time when he hid his illness. If he started treatment at early an early stage his life could have been happier but he is still thankful to Almighty that he is working towards complete recovery.

## Overview of meetings with LEAP members

Following the training, the initial introductory meeting has been convened with Professor Doctor Saeed Farooq, Chief Investigator and Prof Jalil Khan the Principal Investigator, to discuss the involvement of LEAP members in THEHOPE project. During the meetings, THEHOPE team presented a detailed plan to the PI and LEAP and briefed him on the PPIE suggestions. The audience was provided with a tentative plan for using different materials to be used during awareness plan, and a consensus was reached on utilizing Khutbah as a strategy for raising awareness within the community.

- **Khutbah:** Khutbah (sermon) for the Imam was written by religious scholar. The sermon is one of the important components of Islamic teachings as it is a way to reach the masses. It was decided to include it as the main focus of reaching out to the targeted community for general awareness.
- **Posters and flexes:** Catchy posters and flexes with the messages printed related to the project were also presented. They are an important way to give out the awareness to the masses.
- **Pamphlets:** Pamphlets were designed to be distributed among people.



## **Second LEAP Meeting:**

After all the approvals had been finalized regarding the field plan and materials another meeting was called with the LEAP members. Their input and approval was requested for the plan and their feedback was included to finalise the details.



## **2. THE HOPE Community Engagement Activities:**

Community engagement for the Hope project were conducted in three phases:

1. First phase: Psychosis Awareness among the general community
2. Second phase: Meeting Traditional Healers
3. Third phase: Mental Health Awareness among the general community

### **First phase: Psychosis Awareness among the general population:**

A Total of ten (10) community engagement sessions were conducted in this phase covering four (4) Tehsils of Peshawar (*Tehsil is an administrative sub-division of a District. Those are sub-divided into union councils*) in the month of October, 2022. The sessions were conducted by a team of experts including a mental health specialist, consultant family physician and a public health specialist. The aim was to create awareness among the local communities regarding Psychoses, its identification and importance of early identification, referral and management of first episode of Psychoses in the adolescent population.

- i. Comprising of six (6) male focused sessions and four (4) female focused sessions.
- ii. Ninety-five (95) individuals participated in the sessions, out of which fifty-seven (57) were male and thirty-eight (38) were female.
- iii. *Nazims* (local community leader) were actively involved in the sessions.

The team developed the Community Engagement Sessions across various Tehsils in local settings. During developing the community engagement plan special attention was given to inclusion of both male and female based sessions. There was a Diversity among the participants. The participants included individuals from different walks and professions of life. Traditional Spiritual Healers (TSH) within the community also attended the sessions

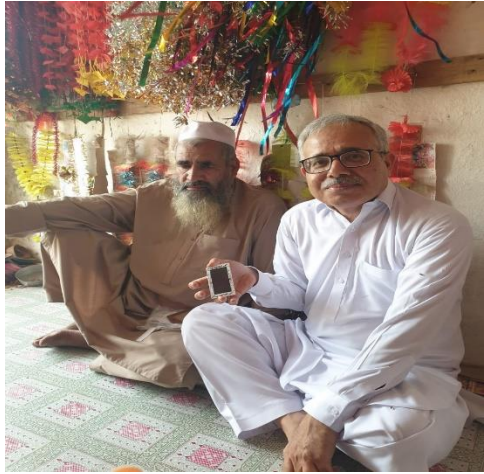
The elders and leaders of the community were encouraged to spread the word among their own families and communities in order to expeditiously link the mentally sick with resources for scientific treatment and recovery.

Elders and leaders in the community expressed interest in the project, pledged their complete support, and indicated their determination to promote it at their level before local authorities, federal and provincial legislators, and senior government officials.

### **Second phase: Meeting with Traditional and Spiritual Healers (TSHs):**

- i. Chief Investigator visited various Union Councils of district Peshawar (*Union Councils are the fifth level (the lowest level) of government in Pakistan. Union Councils are often known as Village Councils in rural areas. The area represented by a Village Council usually comprises a large village and surrounding areas, often including nearby smaller villages*) to meet and greet Traditional and Spiritual Healers on 22<sup>nd</sup> September 2022. A

basic idea about the project goals, brief overview about psychosis was explained and discussed in their local language (Pashto). This visit had a positive impact on the Traditional and Spiritual Healers and built a sense of trust.



- ii. CI along with PI and Co-PIs held a meeting with Traditional & Spiritual Healers on 1<sup>st</sup> Dec 2022. Helpful insight and feedback regarding early intervention in FEP was gathered. TSHs invited Chief Investigator on tea as they always learn and updated about mental health issues. the field visit and personal meeting gives a first hand experience to the team to incorporate the changes accordingly.





- iii. On 2<sup>nd</sup> August, 2023, the Chief Investigator and the Hope research team visited multiple Union Councils, meeting traditional and spiritual healers. TSH shared their feedback and suggestions to improve the referrals and task shifting. There were some concerns and questions raised by TSHs so the Chief Investigator visited and met the TSHs. They asked their queries and Chief Investigator answered them in detail. They were also briefed about the referral mechanism and treatment procedure. TSHs were satisfied and assured their full support.



- iv. CI along with the Hope research team conducted field visit to various union councils in October 2023, meeting traditional and spiritual healers. TSH shared issues they had been facing during the trial. THEHOPE field team frequently visited TSHs for their concerns

and to get updates regarding referrals etc. they always shared their experiences time to time and their feedback incorporated accordingly.



**Third phase: Mental Health Awareness among the general population:**

A Total of eighteen awareness sessions were conducted in this regard from December 2023 – March 2024. The sessions were conducted by field research team under the supervision of the Principal and Chief Investigator. Sessions were conducted at the community level in different Hujras (*Hujra* is a unique facet of communal development and social uplift. It is a platform for the villagers for discussing various issues including but not limited to problems related to their personal and family matters), mosques and primary care facility in accordance with the socio-cultural norms of the area settings. THE CEI team also had meetings with the local community elders and government officials. The aim of the activities was to create awareness on mental health in the general community of Peshawar, Pakistan:

The locations for conducting these CEI sessions were identified after PPIE and research team meetings. The project lead at KMU finalized the areas to avoid clash with the randomized union councils that are a part of this study. The field team was also instructed to avoid areas with security concerns.

A three-member research team visited the area to extend invites to community leaders for making necessary arrangements prior to activities. Relevant information regarding the project and study materials including the pamphlets were shared among the local imams and UC nazims. They were also briefed regarding the content of the sessions. Majority of the Imams and nazims were welcoming. They appreciated the team efforts, endorsed the cause and allowed the team to proceed with the sessions. However, few imams were reluctant and denied the permission to the team due to the fear of backlash from the people.



<b>S. No</b>	<b>Activity</b>	<b>Date</b>	<b>Location</b>
<b>1</b>	<b>World Mental Health Day</b>	<b>10-Oct-2023</b>	<b>University of Peshawar</b>
<b>2</b>	<b>Awareness session</b>		<b>Women University, Peshawar</b>
<b>1</b>	<b>1<sup>st</sup> Awareness session</b>	<b>1-Dec-2023</b>	<b>Jamiya Masjid UC Lala</b>
<b>2</b>	<b>2<sup>nd</sup> Awareness session</b>	<b>2-Dec-2023</b>	<b>Hujra, UC Ghari SherDad</b>
<b>3</b>	<b>3<sup>rd</sup> Awareness session</b>	<b>3-Dec-2023</b>	<b>VC Nazim setting, Hassan Ghari</b>
<b>4</b>	<b>4<sup>th</sup> Awareness session</b>	<b>4-Dec-2023</b>	<b>UC Mathra</b>
<b>5</b>	<b>5<sup>th</sup> Awareness session</b>	<b>5-Dec-2023</b>	<b>UC Ander Shehr</b>
<b>6</b>	<b>6<sup>th</sup> Awareness session</b>	<b>8-Dec-2023</b>	<b>Jamiya Masjid, UC Wadpaga</b>
<b>7</b>	<b>Meeting with Director Elementary &amp; Secondary Education</b>	<b>11-Dec-2023</b>	<b>Directorate of Elementary &amp; Secondary Education, Peshawar</b>
<b>8</b>	<b>7<sup>th</sup> Awareness session with LHWs</b>	<b>12-Dec-2023</b>	<b>BHU, Lala kalay, UC lala</b>
<b>9</b>	<b>Session with youth</b>	<b>12 december, 2023</b>	<b>Technical Institute Warsak road</b>
<b>9</b>	<b>8<sup>th</sup> Awareness session</b>	<b>15-Dec-2023</b>	<b>Masjid/Madrasa Dheri Bhagbanan</b>
<b>10</b>	<b>Meeting with Director Higher Education</b>	<b>18-Dec-2023</b>	<b>Civil Secretariat, Peshawar</b>
<b>11</b>	<b>9<sup>th</sup> Awareness Session</b>	<b>20-Dec-2023</b>	<b>Warsak Road</b>
<b>12</b>	<b>10<sup>th</sup> Awareness Session</b>	<b>22-Dec-2023</b>	<b>Jamiya Masjid, Mathni</b>
<b>13</b>	<b>11<sup>th</sup> Awareness Session</b>	<b>25-Dec-2023</b>	<b>VC Nazim Yakatooth</b>
<b>14</b>	<b>12<sup>th</sup> Awareness Session</b>	<b>29-Dec-2023</b>	<b>Jamiya Masjid, Tarnab Farm</b>
<b>15</b>	<b>13<sup>th</sup> Awareness Session</b>	<b>31-Dec-2023</b>	<b>VC Nazim Nahaqi</b>

<b>16</b>	<b>14<sup>th</sup> awareness Session</b>	<b>3<sup>rd</sup> January 2024</b>	<b>Jamiya Masjid, Rehan Abad, UC Landi Arbab</b>
<b>17</b>	<b>15<sup>th</sup> awareness Session</b>	<b>13<sup>th</sup> January 2024</b>	<b>Afridiyano Ghari, UC Gulbahar</b>
<b>18</b>	<b>16<sup>th</sup> Session arranged by Nazim</b>	<b>2<sup>nd</sup> February 2024</b>	<b>UC Gulbela</b>
<b>19</b>	<b>17<sup>th</sup> Awareness session Session</b>	<b>6<sup>th</sup> February 2024</b>	<b>Governmental organization</b>
<b>20</b>	<b>18<sup>th</sup> Awareness session</b>	<b>02<sup>th</sup> March 2024</b>	<b>UC Mathra</b>

## Community Engagement and involvement (CEI)

### World Mental Health Day (10<sup>th</sup> October, 2023)



An awareness session was held at the Criminology Department of the University of Peshawar on 10th October 2023. The event was organized in collaboration with the Department of Sociology and sponsored by Khyber Medical University, Peshawar. Dr. Johar Ali, the Dean of



the Faculty of Social Sciences, chaired the session, and the guest of honor was Prof. Dr. Saeed Farooq, PI THEHOPE. The session moderator was Dr. Noor Sanauddin, and other guests included Dr. Abdul Jalil Khan, CO-PI THEHOPE, the Chairman of the Department of Sociology, the Chairman of the Criminology Department, and the Faculty of Peshawar

University and Khyber Medical University.

During the session, the focus was on creating awareness about psychosis, its symptoms, and possible treatment options. The event also included a panel discussion on the stigma attached to psychosis, ways to reduce it, and the social impact of mental illness. Dr. Jalil presented a

comprehensive overview of mental health, psychosis, and THEHOPE through a presentation. The session had a total of over 200 participants.

## **Awareness Session at Benazir Bhutto Women University**



A session was held at Benazir Bhutto Women University which was organized by KMU in collaboration with the Department of Chemistry BBWU. The session was attended by various people including the VC BBWU, KMU faculty, BBWU faculty, and students. The moderator of the session was Ishfaq Tariq, and the guests were Dr. Abdul Jalil Khan, Dr. Zoahib, and Dr. Noor Sanauddin. Over 150 students from different departments of the university were present in the session. The distance from KMU to BBWU was approximately 25 KM, which takes approximately one hour to travel.

The session was moderated by Ishfaq Tariq and Dr. Fatima Jamal. The session was addressed by Dr. Abdul Jalil Khana, Dr. Noor and Dr. ZOhaib. The participants were briefed about mental health issues and especially Psychosis in adolescent. The participant took interest and asked various questions from panel.

University administration appreciated the efforts and assured full cooperation in mental health awareness.

## **CEI session (1<sup>st</sup> December, 2023)**

**Location: Jamiya Masjid darul Uloom, Rano Ghari UC Lala.**

On the 1st of December 2023, the first session was held at Jamiya Masjid Darul Uloom in Rano Ghari, UC Lala during the Friday Khutba. The location is situated at a distance of 30kms (50 mins drive) from KMU and was attended by over 200 individuals. The age bracket of the attendees was as follows: 70 individuals aged between 10 and 30, 80 individuals aged between 30 and 50, and 50 individuals aged 50 and above. Prior consent and permission were obtained from the Imam of the mosque.



During the session, the Imam appreciated the efforts and explained the need for mental health treatment and cure. The Project Manager was invited to explain the objectives of the research and provide information about mental health signs and symptoms. The attendees showed great interest and asked various questions. At the end of the session, a question-answer session was held, and people expressed their appreciation for the efforts made by the team and encouraged them to organize further sessions.



## **CEI session (2nd December, 2023)**

### **Location: Warsak road, Ghari Sherdad**

A session was held at a local hujra in Ghari Sher Dad, Warsak road Peshawar. The distance from KMU was 35 km and it took 1 hour and 15 minutes to get there. The session was arranged by a local social mobilizer and had over 50 attendees. The age bracket of the attendees was as follows: 20 were between 10-30 years old, 25 were between 30-50 years old, and 5 were 50 years old and above.

During the session, Ishfaq, the Project Manager, introduced the team and briefed the attendees about mental health. Project Manager presented the overview of the project, importance of mental health and seeking immediate treatment for mental health issues. People listened very keenly and then referred to a few individuals in their social circle who had the similar symptoms as described by the HOPE team but they didn't know who to consult. People were very interested and identified various relatives and others who they believed had symptoms of mental illness. They also shared stories about people who were suffering from severe mental health issues. The team advised them to visit THEHOPE sites for treatment. People assured their cooperation for further community engagement sessions.



## **CEI Session (3<sup>rd</sup> Dec,2023)**

**Location: VC Nazim Setting, Hassan Ghari, Peshawar.**



With the support of the village council nazim in UC Hassan Ghari, a session was organized by the KMU field team in a local Hujra.

Nazim was taken on board and the field team requested him for his support and time. He appreciated the initiative to engage with the general public and talk openly about the mental health issues. The village council Nazim arranged an awareness session for the local people and his team. His team included the vice Nazim, NC Nazim, Kissan councilors, Jirga members and people from the local community. During the session, Project Manager gave an overview of the project and briefed the participants on the overall process of diagnosis and treatment.

Distance: 17 km (40 minutes drive).

Arranged by: Local VC Nazim.

Number of people: 40.

Age brackets:

- 10-30 years: 10 people

- 30-50 years: 20 people

- 50 years and above: 10 people

## **CEI session (4<sup>th</sup> December, 2023)**

## Location UC Mathra.



The location is about 21 km away from KMU, and it takes approximately 50 minutes to reach there by car. There were a total of 20 participants, out of which 5 were aged between 10-30 years, 10 were aged between 30-50 years, and 5 were aged 50 and above.

Government officials of different departments were gathered with the cooperation of a local Malik (local elder). Officials from Health dept., irrigation dept., WAPDA, home dept. attended the session. They were all aware of how stigma related to the mental health disorders prevents the individuals and their families from seeking medical treatment and how most people in such situations seek help from the religious scholars. Officials emphasized on the importance of collaboration with the health

dept. The officials inquired whether this project in any way will facilitate the integration of mental health services in the Sehat Insaf Card (Universal health coverage). And whether this will help in reducing stigma associated with mental diseases in any way?

The Project Manager explained the objectives and purpose of the gathering and briefed the participants on the signs and symptoms of psychosis. They requested the support and cooperation of the attendees in spreading the message within their respective offices. The participants shared their experiences and appreciated the efforts made by the organizers. They assured their full support in disseminating the message.

## CEI Awareness session (5<sup>th</sup> December 2023)



**Location: Jamiya Masjid, Androon Yakatoot.**



An awareness session was held in collaboration with a local religious scholar after Isha prayers. The Project Manager provided an overview of the signs and symptoms of psychosis and mentioned that anyone experiencing mental health issues can contact specialists at Lady Reading Hospital. During the session, the field team noticed that many individuals were hesitant to ask questions. However, a few individuals approached the team after the session to ask for their contact information as they were not comfortable speaking up during the session.

People shared their experiences and pointed out some patients who are probably having those symptoms. They were guided to contact the local TSH for referral. People asked various questions regarding treatment, medicine, and time.

Distance from KMU: 20 km (45 mins drive)

Number of Participants: 120.

Age Brackets:

- 10-30 years: 40 participants.
- 30-50 years: 60 participants.
- 50 years and above: 20 participants.

**CEI Awareness Session (8<sup>th</sup> December 2023)**

**Location: Haryana Jamiya Masjid.**

Distance from KMU: 25 km (1hr 15 mins drive)



There were 250 participants in total, with 80 aged between 10-30 years, 120 aged between 30-50 years, and 50 aged 50 years and above. The mosque was situated in narrow and congested streets, making it almost impossible to drive through. It took an extra 15-20 minutes to navigate through the streets.

The session took place after the Jumma prayers at the Jamiya Masjid. The Imam was very cooperative and supportive, initiating the session and providing a general overview. The Project manager was invited to continue and explained the objectives, signs, and discussed mental health problems. Participants were also briefed on the stigma surrounding mental health issues and how to tackle them in a timely manner. The people were very supportive and assured their full support in spreading the message throughout the area and their homes.

## **Meeting with Director Elementary & Secondary Education (11 December 2023)**

**Location: Directorate of Elementary & Secondary Education.**



A meeting was held with the Director of Elementary and Secondary Education to discuss how Psychosis affects people of all ages, but typically begins to manifest in late teens. The field team shared that they are conducting sessions in different educational institutions with teachers and students to explain the symptoms of psychosis and the pathway to care.

The purpose of these sessions is to emphasize the importance of seeking help as early as possible, as individuals who receive treatment earlier are more likely to recover well. Students should be encouraged to confide in someone they trust, such as a parent, carer, friend or teacher, if they feel like they might be experiencing the symptoms of psychosis. The director appreciated the initiative and assured the team of his full support in implementing the program. He also guided the team to the Secretary of Elementary and Secondary Education for approval to conduct the sessions.

## **CEI Awareness Session with LHWs (12 December 2023)**

**Location: Basic Health Unit (BHU) lala kalay, UC Lala.**



A primary care physician, conducted a session with the lady health workers (LHWs) in Basic health Unit, Lala Kaly. 15 LHWs were present. They were briefed about the common symptoms of mental ill health including psychosis and how to encourage people to seek medical treatment for their mental health issues. As LHWs are recruited from within the local communities, one of the key strengths of involving them in mental health awareness sessions is they can deliver mental health messages in a culturally appropriate and acceptable manner. They have established acceptability in the community and are respected as a healthcare workforce.

One of the LHW mentioned how her uncle who is a patient of depression refuses to seek professional help merely because of what people will say once they find out about their consulting psychiatrist/psychologist.

## **CEI Session with Youth (12 December 2023)**

**Location: Technical Education Institute, Warsak Road Peshawar**



During a recent field visit, the team explained that young adults with mental health conditions are at a higher risk of social exclusion, discrimination, and stigma, which can affect their ability to seek help, lead to educational difficulties, risk-taking behaviors, and physical ill-health. The team also highlighted that symptoms of psychosis typically emerge in late adolescence or early adulthood, including hallucinations or delusions. These experiences can significantly impact a student's ability to participate in daily life and education.

The students were attentive and interested, and requested more detailed sessions. The distance from KMU to the technical educational institute on Warsak road is 13 kilometers, which takes around 40 minutes to reach by car. The participants of the awareness session were students and young people, with an age bracket of 10 to 30 years, totaling to more than 50 individuals. The administration of the institute requested TheHOPE team to conduct a session after learning about the awareness sessions on social media. The students were gathered by the college administration for the session. During the session, Project manager Ishafq provided an overview of mental health and briefed the youth about THEHOPE project. The administration was pleased with the outcome and requested more sessions at their other campuses as well.

## **CEI Session (15 December 2023)**

**Location: Jamiya Masjid/Madrasa UC Chamkani**

The distance from KMU to the location of the masjid and madrasa is 30 km, which takes around 1 hour and 30 minutes to drive. The gathering had more than 300 participants, with age ranging from 10 to 30 years (90 people), 30 to 50 years (150+ people), and above 50 years old (60+ people). The masjid and madrasa are situated at the end of UC Chamkani and have a two-story building. The upper portion is used for educational purposes.



During Friday prayers, the imam asked for permission from the attendees to hold a session. He explained the purpose of the session, which was to raise awareness about the need for treatment and cure for mental health problems, particularly psychosis.

The imam welcomed the field team to the mosque and explained that through quality awareness sessions, the community's mindset can be shifted from false notions about mental health disorders to factual information. This can reduce stigma and social exclusion. The field team further explained how the local community can play a critical role in supporting individuals dealing with mental health problems. When people with mental health issues receive understanding and support from their community, they tend to seek help earlier, leading to better recovery.

The project manager then addressed the audience, providing information about mental health problems and their possible treatment cycles. Attendees were briefed about the signs and symptoms of mental health, specifically psychosis. At the end of the session, some people came forward and shared their condition, who had different symptoms. The team guided them to contact TSH, who would refer them to the appropriate doctor. One of the madrasa students also came forward and explained his condition. The team guided him to contact TSH or LRH immediately for early treatment, as he had all the symptoms of psychosis.

## **CEI session (22 December 2023)**

**Location: Jamiya Masjid Ghari Qamar Din, Ring Road Peshawar**

The awareness session was conducted at Jamiya Masjid, which is located near the Ring Road area, after Friday prayers. The session was attended by more than 90 individuals, consisting of people from different age groups. The participants were divided into three age categories, with



45 individuals aged between 10 to 30 years, 30 people between the age of 30 to 50 years, and 15 individuals aged 50 years and above. The location of the session was approximately 12 kilometers from KMU, which took around 30 minutes to reach.

The session started after Friday prayers with the permission and consent of the Imam. The imam delivered the Khutbah

based on information provided by the field team. The message was for the local community to be involved in its own mental health, and how the only way forward is through enhancing mental health awareness. With rising awareness, it can be expected that early recognition and access to treatment will follow increasing the chances of recovery. Often, because of misconceptions about mental health and mental health issues, people often suffer in silence and their conditions go unattended.

## **CEI session (29 December 2023)**

**Location: Jamiya Masjid Tarnab Farm.**

The distance from KMU is 35 kilometers, which translates to an estimated driving time of 1 hour and 30 minutes. The total number of participants in attendance is over 80 individuals, comprising of various age groups. 40 participants fall into the age bracket of 10 to 30 years, while 25 participants are between 30 to 50 years of age. Moreover, 15 or more participants are aged 50 years and above.

After the Friday prayers, the field team gave an overview of the project and explained the purpose of the session. The team explained how anyone can suffer from mental health issues. They may be in your family, living next door, working or sitting next to you. However, only half of those affected receive treatment, often because of the stigma attached to mental health. Untreated, mental illness can contribute to poorer performance at school, work and in everyday activities. Stigma affects not only the number seeking treatment, but also the number of resources available for proper treatment. Stigma and misinformation can feel like overwhelming



obstacles for someone who is struggling with a mental health condition

It is imperative to note that the event organizers have taken into consideration the age diversity of the attendees. The provision of differentiated age brackets ensures that the event accommodates participants from various age groups. This approach is bound to foster inclusivity and promote a sense of community among the attendees.



# **PPIE members in field**

## **CEI session (3 January, 2024)**

### **Location: Jamiya Masjid, Rehanabad, UC Landi Arbab**

Distance from KMU: 12 kms (40 mins drive)

The field team received a request from PPIE members for a visit and witness awareness session. Dr. Jalil, Lead, was informed about the request. After the approval and detailed discussion the team arranged a session for PPIE member. They were conveyed the location, date and time accordingly. However, 2 members joined the team for session. They witness the session and material used in session.

Before the session, the field team received permission and consent from the imam. The presence of PPIE members was an important aspect of the session, and two members were allowed to join the team with the permission of the CO lead. Over 50 participants were present for the session.

During the session, PPIE members observed the introduction, materials, and overall process. They also interacted with local people and the imam to understand their experiences and feedback. The age range of the participants was as follows: 25 were between 10 and 30 years old, 15 were between 30 and 50 years old, and 8 were over 50 years old.

One of the patients who had recovered from the project was also present in the session. He shared his experiences with the team and PPIE members about his illness, diagnosis, and treatment process.

## **Feed back of PPIE members**

### **Member 2.**

*“the session was very well arranged and well delivered. It was team commitment in this intense cold condition. It was noted that the liaison between Imam and field team was very impressive. Imam gathered the crowd and introduced the team and spoke few words about mental health. Then he invited PM for further elaboration. The address, material, flexes and phamphlets were according to the gathering and peoples understandings. The address was brief and focused on*

*prevailing mental health issues. Overall a satisfactory efforts and session for the awareness of people at such level. However, there is also a need of improvement. One of the suggestion for team is conducting males sessions while the female engagement and awareness is not seen so far. The other thing is some of the terminologies and words are medical while people were unable to understand medical terms. These should be translated and according to people's understanding. It is worth mentioning that the stigma is prevailed and people are reserved to address the issues. Some of the people gathered around the team after session and discussed their issues individually. So in my understanding overcoming and reduction of stigma is the main concern of field team and overall project. ”*

### **Member 3**

*“the commitment of team is very impressive as on our request they have arranged a session in such harsh and intense condition. They managed the whole session very well and used the awarenss materials very well. The communication and understanding among team was incredible. They use local language and deliveded the session according to ethics and cultural setting. The main concern was people's reaction and understanding. It is noted that people are unable to understand mental health issues rather they keep it secret. Few cases and people shared their views which showed that they are unable to recognize the mental health issue as problem. They are not accepting these issues belong to medical rather they visit spiritual healers for their treatment. I would suggest that people believe in spiritual healing so the spiritual healer should be taken on board on mass level to let them recognize and understand of today's need of treatment. I appreciate the team about keeping the limits of awareness and meeting local beliefs. I would suggest to engage females madarassa students and socholrs as during question answer session majority of the people discussing females mental health problems.”*



## **CEI session (12 January, 2024)**

### **Location: Afridyano Ghari UC Gulbahar**

During an informational meeting, a request was made for the team to hold a session at Jamiya Masjid Gulbahar. The Imam was informed about the session and extended an invitation for the team to visit the mosque. Upon receiving approval from the team's leader, they went to the two-story mosque. The session was conducted in a warm and welcoming atmosphere, and the team's interaction with the community was highly productive. Attendees were engaged and asked about how THEHOPE project could benefit their community. The team provided an overview of the project and provided insight into the general perspective around mental health issues in urban areas. There were over 350 people in attendance, with the majority falling into the following age brackets: 100 between the ages of 10-30, over 180 between 30-50, and 70+ over the age of 50. The distance from KMU is 18 kilometers, which takes around 45 minutes to drive.



## **CEI Session arranged by Nazim**

**Location:UC Gulbela.**

At a community engagement session held recently, the field team received a gracious invitation from the Nazim of UC Gulbela to conduct a session at his place. Following the due approval from Dr. Jalil, the field team visited the Nazim's place and conducted a comprehensive briefing for the gathered crowd on the topic of mental health problems, with a specific focus on psychosis.

During the session, the field team covered numerous aspects of the topic, ranging from the causes and symptoms of psychosis to the available treatment options. They also provided the attendees with a clear understanding of how mental health problems can impact a person's life and affect their ability to function normally.

The Nazim and the attendees showed their enthusiasm and support throughout the session, asking relevant questions and sharing their experiences with mental health problems. They expressed their appreciation for the valuable information provided by the field team and assured their full support and cooperation in addressing mental health problems in the community. A total of 30 participants attended the session, including 5 individuals between the ages of 10-30, 20 individuals between the ages of 30-50, and 5 individuals over the age of 50.

## **CEI Session (6<sup>th</sup> Feburay, 2024)**

### **Location: Governemntal Organization.**

The session held with the employees of government organization with a cause to create awareness among the people of lower scales. Official approval from authorities obtained to address the gathering at institutional premises. Ishfaq Tariq briefed the participants about mental health issues. They were briefed about the need of treatment and care. They were informed about the project and need of reducing stigmaamong people especially female patients.



## **CEI Session (2<sup>nd</sup> March, 2024)**

### **Location: UC Mathra**

The session held at Khankha UC Mathra to address huge gathering after weekly event at Khankha. The team provided the objectives and purpose of session to gatehrings. People were updated about the prevailing mental health issues. they were briefed about psychosis especially. The asked various questions related to mental health. People also shared their experience regarding stigma. They also shared personal family experiences regarding mental health. Phamphlets and leaflets were distributed among people to create general awarens and to reduce stigma.



Number of sessions	Total participants	Age bracket 10y-30y	Age bracket 30y-50y	Age bracket 50y n above	Total KMs travel
17	2200+	830+	810+	400+	305+

## Talk shows:

Field team arranged a TV talk show for Dr. Saeed to address the mental health issues on media to create awareness and address different issues related to mental health. It was an amazing talk show where Dr. Saeed explained the overall project and objectives.



### **Talk show on Pakistan Television National:**

Talk show with Dr. Jalil (Lead THEHOPE) on live state television (PTV National Live) regarding psychosis and THEHOPE project. Ishfaq Tariq (project manager) also elaborated the aims and objectives of the project. Dr. Jalil explained the mental health issues specifically First Episode Psychosis in the young age. He also shed the light on effects and delay in early detection of psychosis. Ishfaq explained the reasons and social stigma related to mental health and psychosis. He also explain the trial and objectives of the project.



Link.

<https://www.youtube.com/watch?v=zw9olCQskbM&t=537s>

## *Common Questions Asked by the Participants During Sessions*

- What is the main symptom of mental health disorders?
- How long does it take to cure mental illness?
- Concerns about the doctor's fee.
- A lot of people in my family have the same symptoms that you explained. What to do with them?
- Psychotic drugs are addictive which is why we don't give it to the patient.
- Will Psychoses patients receive any services through HOPE Project?
- Is treatment of Psychosis included in Sehat Card?
- Is complete cure possible in Psychoses?
- What will happen if the patient does not get Psychoses treatment within a specific time?
- If we identify a patient likely to suffer from psychoses, what should we do?
- My daughter suddenly starts screaming in the middle of the night. What could be the issue?
- When patients come to us for spiritual healing, to whom should we refer them for scientific treatment?
- Do you do awareness campaigns in other areas regarding Psychoses?
- Is Drug addiction also the cause of Psychoses?
- Is Psychoses inherited genetically?
- Some people are born with mental illness, is it possible to cure them?
- Will patient use medicine continuously if he/she is suffering from Psychoses?
- We heard that medicines related to mental health issues have tranquilizers and they sedate the patient, is this true?
- What will happen if the patient does not get Psychosis treatment within a specific time?
- If we identify a patient likely to suffer from psychosis, what should we do?



- When patients come to us for spiritual healing, to whom should we refer them for scientific treatment?
- Do you do awareness campaigns in other areas regarding Psychosis?
- Is Drug addiction is also the cause of Psychoses?
- Is Psychoses inherited genetically?
- Some people are born with mental illness, is that possible to cure them?
- Will patient use medicine continuously if he/she is suffering from Psychoses?
- We heard that medicines related to mental health issues have tranquilizers and they sedate the patient, is this true?
- Can using headphones for longer periods cause mental health issues?
- I feel scared during the night. I wake up feeling anxious with strange thoughts in my head.
- When I am studying, I start to see weird things and then they disappear.

## Annex 1: CEI Pamphlet



”کیا آپ یا آپ کے  
کسی جاننے والے کو  
مندرجہ ذیل میں  
سے کوئی علامات  
ہیں؟“



- ❖ کیا آپ یا آپ کے کسی جاننے والے کو ایسی آوازیں سنائی دیتی ہیں جو اور کسی کو سنائی نہیں دیتی؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے کو ایسی چیزیں یا لوگ دکھائی دیتے ہیں جو اور کسی کو دکھائی نہیں دیتے؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے کے ذہن میں ایسے خیالات آتے ہیں، جنہیں لوگ بے بنیاد کہتے ہیں؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے کو ایسا محسوس ہوتا ہے جیسے لوگ آپ کا پیچھا کر رہے ہیں یا آپ کو مارنے کے درپے ہیں؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے کو روز مرہ کے کاموں میں مشکلات کا سامنا کرنا پڑتا ہے؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے کے سماجی تعلقات پہلے سے نہیں رہے؟
- ❖ کیا آپ یا آپ کے کسی جاننے والے سے ایسی حرکتیں سرزد ہوئی ہیں جو معاشرتی طور پر مناسب نہیں تھیں؟


اگر ایسا ہے تو آپ اکیلے نہیں ہیں۔

آپ کو چاہئے کہ فوراً کسی مستند زہنی معالج سے رابطہ کریں  
اور بہتری کی طرف گامزن ہونے کا آغاز کریں۔

LRH: 0311-8153354  
HMC: 0336-4002304

رابطہ:

THE HOPE



**THE HOPE**  
(Research Project)

(Department of Psychiatry)

**NAEEM**  
(Site Coordinator)

Cell:(For LRH) 0311-8153354  
Cell:(For HMC) 0336-4002304

Lady Reading Hospital Near Khyber Bazar Peshawar.

THE HOPE



**دی ہوپ**  
(ریسرچ پروجیکٹ)

(شعبہ نفسیات و منشیات)

**نعیم**  
(سائٹ کوارڈینیٹر)

رابطہ:  
0311-8153354 رابطہ برائے لیڈی ریڈنگ ہسپتال  
0336-4002304 رابطہ برائے ایچ۔ ایم۔ سی

لیڈی ریڈنگ ہسپتال نزد خیبر بازار پشاور

## Referral Form



### ابتدائی ریفرل فارم

نام..... عمر..... جنس..... تاریخ..... رابطہ نمبر..... سفارش کار؟ نمبر.....  
پتہ.....

1. کام کی نوعیت:  
1. ملازم  
2. ازواجی زندگی:  
1. شادی شدہ  
2. غیر شادی شدہ  
3. کس سے بچھا:  
1. روحانی علاج کرنے والا  
2. بنیادی صحت/دیگی بہال کا معالج  
3. کوئی دوسرا (وضاحت کریں)  
4. کس کو بچھا:  
1. لیڈی ریڈنگ ہسپتال  
2. حیات آباد میڈیکل کیمپس  
3. بنیادی مرکز صحت  
5. علامات:

6. آپ کے خیال میں مریض کو کیا مرض/بیماری ہے؟ (چارٹ دیگیہ فرمٹان لکھیے)

1 2 3

7. اگر آپ سے نمبر 1 کا انتخاب کیا ہے تو آپ کو اس مرض کے بارے میں بتاؤ یقین ہے؟

1 2

8. آپ کے خیال میں اس مرض کی روحانی وجہ کیا ہو سکتی ہے؟

1. جن 2. تعویذ کا اثر 3. سایہ کا اثر

9. کوئی اور وجہ (برائے مہربانی وضاحت سے لکھیں اور روحانی معالج سے جو الفاظ بتائے اسی طرح لکھیں):

10. اس سے پہلے ذہنی مرض کے علاج کے لیے کسی ڈاکٹر کے پاس گئے ہو؟

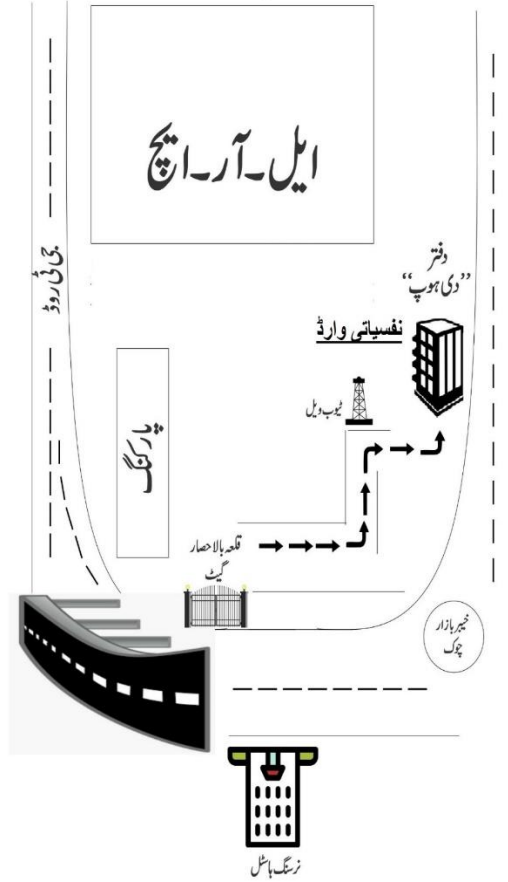
(ہاں/نہیں)

11. اگر ہاں تو دوائی کتنے عرصے کے لیے استعمال کی ہے؟

1. چھ ہفتوں سے زیادہ 2. چھ ہفتوں سے کم

12. سہ ماہی رجسٹریشن کے لیے بچھا:  
(ہاں/نہیں)

## ”دی ہوپ“ دفتر کا نقشہ



## سوال 7

1. یقیناً
2. شاید/ممکنہ

## سوال 6

آپ کے خیال میں مریض کو کوئی بیماری/مرض ہے۔

1. سائیکوسس
2. مرگی
3. کوئی اور ذہنی مرض (تفصیل سے بیان کریں)۔

## CEI Khutba

جسمانی اور ذہنی امراض اور ہماری شرعی ذمہ داری

(مفتی آفتاب عالم ایم اے علوم اسلامیہ، ایم اے اردو، بی ایڈ)

شریعت اسلامیہ کے مقاصد میں انسانی جسم اور عقل کی حفاظت ایک لازمی حیثیت رکھتے ہیں۔ شریعت اسلامیہ کے پانچ مقاصد ہیں۔ دین کا تحفظ، انسانی جان کا تحفظ، انسانی عقل کا تحفظ، انسان کی نسل کا تحفظ، اور انسان کے مال کا تحفظ۔ ویسے تو اسلام پانچوں مقاصد کا تحفظ چاہتا ہے۔ تاہم درج ذیل سطور میں انسانی جان اور عقل کی حفاظت پر بحث کریں گے۔

انسان اس کائنات کا سب سے حسین ترین اور بہترین مخلوق ہے یہ اللہ کی مکرّم اور معزز مخلوق ہے۔ " ارشاد باری تعالیٰ ہے: "لَقَدْ خَلَقْنَا الْإِنْسَانَ فِي أَحْسَنِ تَقْوِيمٍ" یعنی ہم نے انسان کو بہت خوبصورت ستارچہ میں ڈالا ہے اور فرمایا "وَلَقَدْ كَرَّمْنَا بَنِي آدَمَ" اور ہم نے عزت دی ہے آدم کی اولاد کو۔ شریعت کے بہت سے احکام انسانی جان اور عقل کے تحفظ کے لیے ہیں۔

ظاہر ہے انسان اس دنیا میں صحت اور سلامتی کے ساتھ موجود ہوگا تو احکامات الہیہ پر عمل درآمد ہوگا۔ اسی طرح اگر انسان کا عقل و دماغ امراض سے متاثر ہوگا تو شرعی ذمہ داریوں کو کیسے صحیح نہج پر پورا کر سکے گا۔ اس لیے کوئی ایسا کام، حرکت، عمل جس سے انسان کی عقل خراب ہو جائے وہ جائز نہیں ہے۔

یہی وجہ ہے کہ نشہ اور اتیہ اور منشیات کو سختی سے حرام قرار دیا گیا ہے۔ جن اعمال سے انسانی عقل متاثر ہوتی ہے جیسے مسمریزم، جادو یہ سب شریعت میں اس لئے ناجائز ہیں کہ یہ انسانی عقل کو متاثر کرتے ہیں اور سوچنے سمجھنے کی صلاحیتوں کو مٹا کر دیتے ہیں۔ معلوم ہوا کہ انسانی جان اور عقل کی حفاظت انسان کی اولین اور اہم ذمہ داری ہے۔

یہ جان اللہ تعالیٰ کی طرف سے ایک عظیم نعمت اور امانت ہے۔ عالم اسباب میں انسان کے بدن اور اس کے اعضاء کا صحت مند اور تندرست ہونا سہولت اور آسانی کے ساتھ اللہ کے دین پر چلنے، متعلقہ ذمہ داریوں کو پورا کرنے اور اس کے مقصد تخلیق کی تکمیل کا ذریعہ ہے۔ جسمانی اور عقلی صحت اللہ کا خاص احسان اور ایمان کے بعد سب سے بڑی نعمت ہے۔

حضرت ابو بکر صدیق رضی اللہ عنہ روایت کرتے ہیں کہ انہوں نے رسول اللہ صلی اللہ علیہ وسلم کو یہ ارشاد فرماتے ہوئے سنا کہ اللہ سے یقین اور عاقبت (وصحت) کا سوال کیا کرو، اس لیے کہ کسی کو ایمان و یقین کے بعد جو سب سے بڑی دولت ملی ہے وہ عاقبت ہے واضح رہے کہ عاقبت سے دنیا کے تمام قلبی، دماغی اور جسمانی امراض دور ہوتے ہیں۔

ان روایات سے معلوم ہوا کہ جسمانی صحت اور تندرستی نیز عقل و دماغ کی سلامتی اللہ تعالیٰ کی بہت بڑی نعمت ہے۔ اس لیے ان کو بیماریوں سے بچانا انسان کی اہم ذمہ داری ہے۔

انسان کو جسمانی بیماریوں کے ساتھ دماغی اور نفسیاتی امراض سے بھی سابقہ پڑتا ہے۔ عام طور پر ہمارے معاشرہ میں جسمانی امراض کے علاج کی طرف توجہ دی جاتی ہے تاہم دماغی اور نفسیاتی امراض کے علاج معالجہ کی طرف بہت کم توجہ دی جاتی ہے جس سے ان امراض اضافہ ہو رہے۔ یہ دور مسائل کا دور ہے۔ آج کا انسان معاشی معاشی اور خاندانی مسائل کا شکار ہے۔ جس کی وجہ سے کئی نفسیاتی بیماریاں مثلاً سٹریس، ڈپریشن، انزالیٹی، بینک ڈس آرڈر اور سائیکو سس جیسی خطرناک بیماریاں جنم لے رہی ہیں۔

سب سے افسوسناک پہلو یہ ہے کہ لوگ ان کو قابل علاج بیماریاں نہیں سمجھتے یا اس کی ضرورت محسوس نہیں کرتے۔ اور نفسیاتی بیماری کے شکار فرد کے بارے میں عجیب و غریب توہمات میں مبتلا ہوتے ہیں۔ مثلاً کسی نے اس پر کالا جادو کیا ہے، اس پر سایہ ہے، کسی نے گھٹے ٹھونڈے کیے ہیں وغیرہ وغیرہ۔

واضح رہے کہ جان اور نظر بد کا اثر ہے شک ثابت ہے، وہ اپنی جگہ ایک حقیقت ہے۔ تاہم اس نوعیت کے، ہر مریض کو مذکورہ چیزوں کا یوں کرنا ایک غلط اور نقصان دہ طرز عمل ہے نیز یہ بھی واضح رہے کہ شرعاً عیالات کی حیثیت ظننات کے قیبل سے ہے۔ اس سے کوئی یقینی حکم ثابت نہیں ہوتا۔ حقیقت یہ ہے کہ انسان کو مختلف قسم کی دماغی اور نفسیاتی امراض سے سابقہ پڑتا ہے۔ صحیح العقیدہ اور خدا ترس نیک حضرات سے دم درود بھی کرنا چاہیے۔ تاہم اصل علاج سائیکولوجسٹ یا سائیکوٹریسٹ ڈاکٹر سے کرنا چاہیے جس سے متعلقہ مریض کو بتدریج آفاقہ ہو جاتا ہے۔ اور وہ اس مرض سے چھٹکارا پالیتا ہے۔

اس قسم کی بیماریوں کے علاج کے لیے لڈی ریٹنگ ہسپتال اور حیات آباد میڈیکل کمپلیکس میں ماہر اور مستند ڈاکٹروں کی ٹیمیں موجود ہیں، جو حضرات ان سے فری معائنہ (چیک اپ) کرنا چاہتے ہیں، وہ درج ذیل نمبروں پر رابطہ کر لیں۔

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# The Field Team



## **What is HOPE?**

*“THEHOPE is a dialogue with Traditional and Spiritual Healers for improving patients outcomes in a severe mental illness”*

Dr. Saeed Farooq