

# Humanitarian Innovation Hackathon



3 GOOD HEALTH  
AND WELL-BEING



## Mental Health and Wellbeing

### The Issue

Mental health of youth and adolescents is a major public health concern, with limited progress being made in the Pacific over the last decade. Youth in the Solomon Islands face negative impacts of substance abuse, inadequate levels of education, lack of employment opportunities, depression, violence, sexual abuse, gender disparity and suicide.

COVID-19 is an unprecedented global health crisis, and its impacts have exacerbated the existing learning crisis and protection issues in the country.

There are concerns that disruptions to education will result in increased protection risks (e.g. child labour, forced marriage, and domestic violence), which poses significant longer-term risks, including the overall physical and mental well-being of youths.

An additional challenge is the social stigmatization of mental illness within the Solomon Islands.

## Hackathon Challenge C

**Humanitarian Mentor:** Lauren Harris

**COVID-19 has exacerbated longstanding mental health and well-being of youth and adolescents in the Solomon Islands.**

How can we improve and better integrate mental health and psychosocial support for youths, a longstanding issue exacerbated by COVID-19, to meet their immediate needs during the crisis, while also considering the opportunities in 'building back better' post-COVID?

### Persona 1

Benjamin is a 16-year old teenager who pre Covid, was skipping several classes to hang with friends or undertake informal odd jobs, but still enjoyed going to art classes as he had an interest in drawing and building things. Since Covid-19 lockdowns and school closures he has seen no point in returning to school, and this has further disrupted his learning and access to vocational training or livelihood opportunities.

As a school drop-out, he is now unemployed and has a big family to support including five younger siblings, an unwell and alcoholic father, and his mothers' parents who live with them. He did try to access vocational training opportunities online but, living in a rural region, the internet is patchy and he doesn't have regular access to a computer.

Instead, he hangs around outside by the beach, smoking and not eating well, and running errands or doing odd jobs if/when he can find them in return for cash or items he can use to try and trade. Of the jobs he can find, he is working mostly late at night and in conditions where he is at high risk of being harmed (e.g. industrial work). He has struck up relationships with local drug dealers, and a few times he has been asked to deal small amounts of drug. He is also involved in petty crime, and with other youths has been pick-pocketing when the opportunity arises.

Benjamin feels more and more hopeless and depressed as time goes on. He has started drinking more and sometimes takes drugs which are offered to him by other kids in a similar situation he is hanging out with. He has started to get into fights with local gangs and has started to suffer some health issues such as shortness of breath and panic attacks.

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## Hackathon Challenge C

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### Persona 2

Rosa is a 13-year-old girl that lives in the Solomon Islands with her three sisters and mother. Her father passed away when she was young from malaria, and her mother has had to scrape by through selling produce at a local market and cleaning and ironing for government families. She is the oldest of her siblings, and feels responsible for their well-being. Due to COVID-19 lockdowns and school closures, Rosa hasn't been able to attend school and instead of joining classes online, has been sent out to work in hard labour agricultural work at a nearby farm (child exploitation). However, when she is at school, she doesn't know who to talk to or how to address her concerns. She is worried that her peers and teacher won't understand her anxieties. She thinks that there is no point in doing anything, and she should keep all her thoughts to herself.

Her Mother has been talking to another village chief about the option of marriage to someone in his village who has recently lost his wife. He has four young children under the age of 14 to bring up and he wants a young wife to look after his children. There have been renewed reports of the involvement of some young female students in prostitution activities, linked to their families' inability to pay for school fees which was an issue on the rise prior to this current crisis.

Rosa starts to become more anxious, and cannot sleep at night. She loses her appetite and is teary a lot of the time. She has tried to access online resources, but this is limited due to her unreliable internet at home. In addition, the limited education funding that there was for her region has also been redirected to more immediate priorities such as improving healthcare infrastructure. Consequently, there is a lack of quality teachers and a lack of resourcing, in which Rosa isn't able to gain access to the materials and books she needs for her classes. She just wants to learn and play with her friends at school.





The Warren Centre  
& Professor Ron Johnston

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### Resources

**Mental health and psychosocial support (MHPSS): Child Friendly Spaces, Save the Children in Emergencies: A handbook.**

<https://www.savethechildren.org/content/dam/global/reports/education-and-child-protection/cfs-handbook-08.pdf>

**Under the same sky: How a year of COVID-19 affected Asia-Pacific children, Save the Children (2021).**

<https://resourcecentre.savethechildren.net/library/under-same-sky-how-year-covid-19-affected-asia-pacific-children>

**Healing and recovery through Education in Emergencies.**

[https://resourcecentre.savethechildren.net/node/15211/pdf/\\_ecw\\_briefing\\_aw.2\\_lr.1.pdf](https://resourcecentre.savethechildren.net/node/15211/pdf/_ecw_briefing_aw.2_lr.1.pdf)

**Psychosocial support for children and adolescents in emergency settings.**

[https://resourcecentre.savethechildren.net/node/10758/pdf/english\\_pss\\_manual\\_english\\_version\\_june2017.pdf](https://resourcecentre.savethechildren.net/node/10758/pdf/english_pss_manual_english_version_june2017.pdf)

**Road to Recovery: Responding to Children’s Mental Health.**

[https://resourcecentre.savethechildren.net/node/15721/pdf/road\\_to\\_recovery\\_final\\_low\\_res.pdf](https://resourcecentre.savethechildren.net/node/15721/pdf/road_to_recovery_final_low_res.pdf)

**INEE Minimum Standards for Education: Preparedness, Response, Recovery. (2010).**

<https://inee.org/resources/inee-minimum-standards>



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## Background

Mental health of youth and adolescents is a major public health concern. The WHO Country Cooperation Strategy for Solomon Islands 2013–2017 notes that there has been limited progress in mental health care in the Pacific during the last decade, while trends for substance abuse, addictive behaviours, depression and suicide were increasing. According to a 2008 report, youth in the Solomon Islands, particularly in the capital Honiara, face negative impacts of substance abuse, inadequate levels of education, lack of employment opportunities, depression, violence, sexual abuse, gender disparity and suicide. Further, unemployment amongst youth (15–24-year-old) reached alarming rates of 75%, an increase of 15%.

COVID-19 is an unprecedented global health crisis, and its impacts have exacerbated the existing learning crisis and protection issues in the country. For some, schools are more than just a place for learning. Schools protect children from the physical dangers around them – including abuse, exploitation and recruitment into armed groups or violent gangs. They provide children with lifesaving food, water, health care and hygiene supplies, especially in an emergency. And they offer psychosocial support, giving children stability and structure to help them cope with the trauma they may experience. COVID19 has affected the traditional delivery of face-to-face learning. There are concerns that with disruptions to education (i.e., school closures, redirected funding) will result in an increase to protection risks (child labour, forced marriage, domestic violence), and poses significant longer-term risks, including to youths overall physical and mental well-being.

It is important to note that one of the longstanding barriers to implementing mental health programmes relates to the social stigmatization of mental illness within the community. There is also a lack of awareness and information about the impacts of a crisis like the COVID-19 pandemic on youths' mental health and well-being, and failure to implement protective behaviours. In considering humanitarian responses linked to quality education, proposed solutions should look to also address these challenges. Minimum standards for Mental Health and Psychosocial Support (MHPSS) in humanitarian response can be found in the SPHERE humanitarian minimum standards. It is also important to note this is a fairly emerging field, and are sometimes not well integrated into responses. It is vital that solutions should not be created in isolation of the impacted community, and to consider how to best to ensure a community-driven and integrated approach.

