### REVIEW AND MAPPING OF MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT SERVICES IN MALAYSIA

ILMU HASANAH 30<sup>TH</sup> MAY 2023

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**INTRODUCTION** 

The National Health Morbidity Survey (2017) reported that 1 in 5 adolescents in Malaysia were suffering from depression. Mental health screening at school, periodically counsellor monitoring, promoting mental health awareness program and introduction to peer support group are highly recommended. There is limited "ground work" that could map out the accessibility and suitability of the existing programme and service related to mental health disorders among adolescents.

### **RESEARCH OBJECTIVES**

Provide base-line data of the situation in country with regards to mental health policy, programmes and services for students, adolescents, and their families.

Identify gaps in policy frameworks, programmes and service provision and formulate recommendations for overcoming the challenges.

Identify and document promising practices to promote an exchange of knowledge on initiatives for students and adolescent mental health and psychosocial wellbeing.



Demographic Variable	Category	Frequency (f)	Percentage (%)
Age*		15.34	2.70
Gender	Male	371	38.6
	Female	589	61.4
Race	Malay	883	92.0
	Indian	44	4.6
	Chinese	33	3.4
Religion	Islam	880	91.7
	Hindu	40	4.2
	Buddha	29	3.0
	Christian	7	0.7
	Others	4	0.4 5

Demographic Variable	Category	Frequency (f)	Percentage (%)
Siblings	No siblings	11	1.1
	1 to 3	377	39.3
	4 to 5	425	44.3
	6 and more	147	15.3
Parents' Marital	Married	874	91.0
Status	Divorced	72	7.5
	Live Separately	14	1.5
Family's	B40	452	47.1
Monthly	M40	388	40.4
Income	T20	120	12.5
Type of School	Daily	444	46.3
	Boarding	516	53.8
Education Level	Primary	136	14.2
	Secondary	595	62.0
	Tertiary	229	23.9 <sup>6</sup>

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🖵 ID	Education	Occupation	Years of	Platform of	Language
			Experience	interview	Used
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SH1	Master	Psychiatrist	11 years	Online	English
SH2	PhD	Clinical Psychologist	5 years	Online	English
SH3	Master	Clinical Psychologist	1.6 years	Online	English
SH4	Master	Psychiatrist	9 years	Online	Malay
SH5	Bachelor	School Counsellor	26 years	Online	Malay
SH6	Bachelor	School Counsellor	21 years	Online	Malay
SH7	PhD	Non-Governmental Organization	N/A	Online	English
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SH8	PhD	Non-Governmental Organization	22 years	Online	Malay
SH9	Bachelor	School Counsellor	11 years	Online	Malay
SH10	Bachelor	School Counsellor	15 years	Online	Malay
SH11	Bachelor	School Counsellor	10 years	Online	Malay
SH12	Master	School Counsellor	14 years	Online	Malay
SH13	Bachelor	Parent	N/A	Online	Malay
SH14	Bachelor	School Counsellor	11 years	Online	Malay
SH15	Bachelor	Parent	N/A	Online	Malay

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	Phase	Findings	Recommendations
~	Phase 1 Desk review	Increasing trends of mental health problems among adolescents 2011-2017	
		Secondary school students (13-17 years old) have significantly higher problems in mental health.	The need to focus on at risk group
		Measures used to assess mental health problems among adolescents were unstandardized across the years.	A standardized assessment instrument/tool that comprehensively measures all aspects of mental health issues,
		Several general mental health policies, lack of mental health policies and programmes on adolescents' mental health.	including depression, anxiety, stress.

Phase	Findings	Recommendations
Phase 2 Scoping review	Several high-impact programmes and services for adolescents' mental health with more than half of the programmes conducted at school (15 out of 26 programmes).	A school-based mental health promotion intervention to build resilience in school children/adolescents- must include school counsellors, students/peer support, and parents/families.
	Schools seemed to be a more familiar, less stigmatised and acceptable setting to seek and receive mental health services as compared to the community health clinics or psychiatric setting	Talks, quizzes, online games, mental health awareness competitions
		Emotions and feelings, cognitive reappraisal, problem-solving, behaviour activation, relaxation techniques, self-monitoring etc.

Phase	Findings	Recommendations
Phase 3 Online snapshot survey	1 in every 2 adolescents displayed anxiety symptoms, and 1 in every 3 adolescents experienced stress and depressive symptoms.	Emphasize the need of a school- based mental health promotion intervention
	Increase of 10% rate for depression, 10% rate for anxiety, and 20% rate for stress levels among adolescents.	
	Associated factors: Secondary school, female, those studying in boarding schools, have 4 to 5 siblings, & those from the B40 categories.	These findings should be shared with school counsellors in Malaysia therefore early identification and treatment can be initiated.

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Phase	Findings	Recommendations
Phase 4 In depth semi structured interviews with	Mental health issues have caused low academic performance and increased suicidal behaviours	Multidisciplinary team (and cross sectoral management) is required to combat adolescents' mental health problems (health-school-community)
stakeholders	Policies and pathways to help-seeking were unclear, specific guidelines for adolescents' mental health were unavailable, and parental awareness and cooperation were still low.	Training for school counsellors Parents awareness & involvement
	Low mental health literacy and stigma (especially among parent) had resulted in the delay of getting relevant professional intervention.	Online approach (helpline/chatbox on social media/website)- approachable, easily accessible, stigma-free, anonymity

"So, there are parents who cannot accept it, they say "my child is okay at home, there is nothing wrong" but what they don't see, that the child has already started to self-harm, right?" (SH 6, School Counsellor)

"Sometimes, the mother doesn't even know that her child has an issue, only to know when the teacher calls. So, if a student has problems, for example, mental health, I think that support is important and that mom and dad need to know" (SH 10, School Counsellor)

Actually his brother told me that he saw the wound at his hand, and I can see it too. But I didn't ask.....His academic performance doesn't go well. I was concerned.... After so long then only I came to know that he had depression. He was bullied at school, and know nothing about that (SH13, Parent)

### "So, I think if we can empower even at the level of the Health Clinic, it means you allow this child and adolescent to come to seek help, it means he has a special pathway too, right because sometimes he doesn't come with his parents because one might be ashamed of that issue. So, I think if we can empower near the Health Clinic level it would be a way forward because it means that there is a special pathway that the boy comes without the parent, he can still be accessed somehow." (SH 1, Psychiatrist)

"So, when we talk, to make a program with the students, so we build the relationship with the counsellors. So, these counsellors, when it's like certain cases like he's not sure what to do, they can discuss with us, they'll call us up and ask or they don't feel afraid to refer." (SH 1, Psychiatrist)

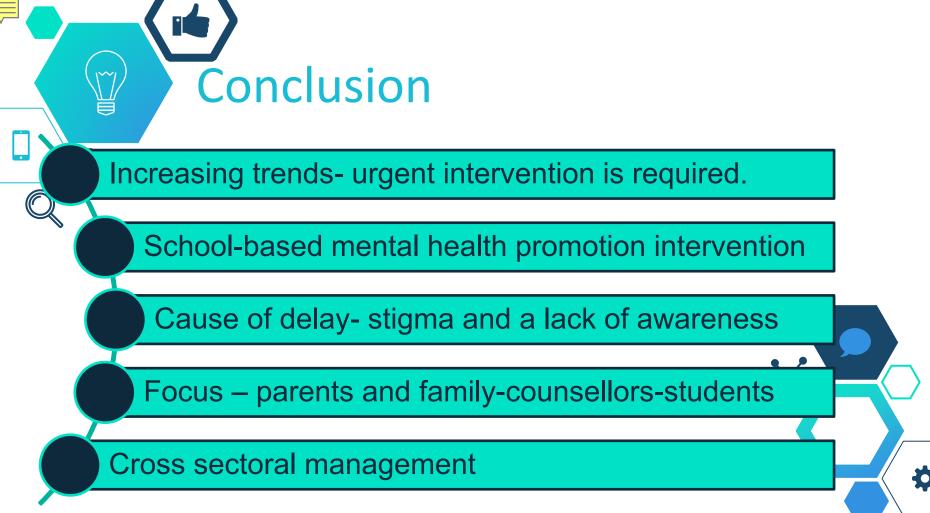
"If dementia, for adults we have MENTARI. MENTARI is the same concept as that. But for adolescents and children, we don't have it. And let's say you have an adolescent that is neglected by abuse, where does the boy need to go, and whom does he want to call." (SH 4, Psychiatrist)

"The medical officer would not have that training, but they would be sometimes the first person to see the patient or during follow-up. So, there may be in terms of because there is no training that would also be a barrier, so he doesn't know how to relate, how to build rapport, how to get the history from the child and adolescent." (SH 1, Psychiatrist)



"I look at the aspect of, what kind of social media that immediately reach people, so we want to use things, we want to use that mechanism, in order to immediately reach, to counter back the old pattern." (SH 5, School Counsellor)

If possible, more programs can be made available for teenagers. I can't see it now. Sometimes you also search to see if there is a program, there are many programs now for children aged 7-12 (SH15, Parent).





APPENDIX

#### Tentative Agenda

Time	Agenda		
9.30am	Doors Open & Light Refreshments		
10.00am	Welcoming Remarks by the Head of Education at Yayasan Hasanah		
10.10am	"Review and Mapping of Mental Health and Psychosocial Support Services in Malaysia" Research Paper Presentation		
	Speaker:		
	<b>Assoc. Prof. Dr. Siti Roshaidai Binti Mohd Arifin</b> Associate Professor, International Islamic University Malaysia (Kuantan Campus)		
10.20am	Q&A Session		
10.30am	"Mental Health for Vulnerable Youths" Panel Discussion		
	Speaker:		
	<b>Farihin Ufiya Binti Mohd Azeem</b> Co-Founder, Mental Health Aid Association (Nyawa)		
	<b>Dr. Nurashikin Binti Ibrahim</b> Head, National Center of Excellence for Mental Health, Ministry of Health		
	<b>Farzena Balan</b> Special Projects Director, Saora Industries		
	Moderator:		
	<b>Ethan Ganes</b> Masters in Counselling Candidate, Monash University		
11.10am	Q&A Session		
11.40am	Token of Appreciation Presentation		
11.50am	Group Photo		
12.00pm	Lunch		



17 Mac 2023

#### SEPERTI SENARAI EDARAN

YBhg./YBrs./Datuk/Dato'/Dr./Tuan/Puan,

#### JEMPUTAN KE PERBINCANGAN MEJA BULAT KESIHATAN MENTAL ANJURAN YAYASAN HASANAH

Dengan segala hormatnya merujuk kepada perkara di atas.

2. Sukacita dimaklumkan bahawa, fokus sektor Pendidikan di Yayasan Hasanah ("Hasanah") memberi penekanan kepada program kesihatan minda bagi meningkatkan kapasiti para kaunselor serta kesedaran dalam kalangan murid. Sebagai yayasan berasaskan impak melalui pemberian geran, Hasanah telah menjalin kerjasama dengan beberapa rakan strategik untuk membolehkan pelaksanaan program kesihatan mental di seluruh negara.

3. Untuk makluman YBhg./YBrs./Datuk/Dato'/Dr./Tuan/Puan, Hasanah berhasrat menganjurkan perbincangan meja bulat kesihatan mental untuk memudahkan perkongsian terbuka mengenai pelbagai perspektif, pengalaman dan pendekatan pihak berkepentingan kesihatan mental di Malaysia. Dengan itu, Hasanah ingin menjemput wakil-wakil kerajaan, swasta, pertubuhan bukan kerajaan atau organisasi masyarakat sivil yang terlibat untuk menghadiri **Perbincangan Meja Bulat Kesihatan Mental anjuran Hasanah** seperti ketetapan berikut:

Tarikh	: 28 Mac 2023, Selasa
Masa	: 10.00 pagi hingga 12.30 tengah hari
Tempat	: Yayasan Hasanah
	Tingkat 3, Blok A, Dataran PHB Saujana Resort
	Seksyen U2, 40150 Shah Alam, Selangor

4. Sebarang pertanyaan berkaitan bengkel ini boleh dirujuk kepada **Cik Chow Shenn Kuan**, melalui emel **shenn.kuan@hasanah.org.my** atau melalui talian **012-504 5883**. **Maklum balas kehadiran adalah melalui emel tersebut**.

5. Segala perhatian dan keprihatinan YBhg./YBrs./Datuk/Dato'/Dr./Tuan/Puan berhubung perkara ini saya hargai dan dahului dengan ucapan terima kasih.

Sekian.

Saya yang menjalankan amanah,

**ZADIL HANIEF MOHAMAD ZAIDI** Ketua Pegawai Strategi Yayasan Hasanah

#### SENARAI EDARAN PERBINCANGAN MEJA BULAT KESIHATAN MENTAL ANJURAN YAYASAN HASANAH

 Kementerian Pendidikan Malaysia Bahagian Pengurusan Sekolah Harian Aras 3 & 4, Blok E2, Kompleks E Pusat Pentadbiran Kerajaan Persekutuan 62604 Wilayah Persekutuan Putrajaya (u.p.: Tuan Saiful Effendi Bin Mohd Zahari, Ketua Penolong Pengarah, Unit Pengurusan Kaunseling dan Kerjaya Murid Tuan Mohd Pilus Bin Abdullah,

Penolong Pengarah, Unit Pengurusan Kaunseling dan Kerjaya Murid)

#### 2. Kementerian Kesihatan Malaysia

Bahagian Kawalan Penyakit Aras 3, Blok E10, Kompleks E Pusat Pentadbiran Kerajaan Persekutuan 62590 Wilayah Persekutuan Putrajaya

#### (u.p.: Dr. Nurashikin Binti Ibrahim, Ketua Sektor Kesihatan Mental, Pencegahan Kecederaan dan Keganasan Dan Penyalahgunaan Substans)

#### 3. Puan Alina Amir

Ketua Pegawai Eksekutif, Arus Academy

#### 4. Tuan Rudie Yaakob

Ketua Pegawai Eksekutif, Bring the Opportunity Program (BTOP)

#### 5. Puan Claire Fabian

Penolong Pengurus, Good Shepherd Services

#### 6. Tuan Darick Wong

Pengarah Negara, HOPE Worldwide Malaysia

- 7. Assoc. Prof. Dr. Siti Roshaidai Binti Mohd Arifin IIUM Entrepreneurship and Consultancies
- 8. Prof. Dato' Dr. Andrew Mohanraj Pengerusi, Malaysian Mental Health Association (MMHA)

#### **9. Puan Ivy Tan** Pengerusi, Malaysian Music Therapy Association (MMTA)

#### **10. Dr. Lynne Yong Ee Lin** Pengerusi, Malaysian Society of Clinical Psychologists (MSCP)

- **11. Puan Farihin Ufiya Binti Mohd Azeem** Pengarah, Mental Health Aid Association (NYAWA)
- **12. Puan Anita Abu Bakar** Pengerusi, Mental Illness Awareness and Support Association (MIASA)
- **13. Dr. Siti Taniza Toha** Pengerusi, Persatuan Kaunseling dan Pendidikan Malaysia (PEKA)
- 14. Dr. Shazli Ezzat Ghazali Naib Presiden, Persatuan Psikologi Malaysia (PSIMA)
- 15. Tuan Kelvin Tan Ketua Pegawai Eksekutif, Pertubuhan Akademi Project ID
- 16. Puan Norzalina Masom Pengurus Besar, PINTAR Foundation

#### **17. Puan Farzena Balan** Pengarah Operasi, Saora Industries

**18. Puan Ellisha Othman** Pengarah Urusan, Thrive Well