



# KENYA DIASPORA MENTAL HEALTH ACTION PLAN



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## **FOREWORD**

The Kenyan Diaspora is an integral part of our national identity, representing a vibrant and dynamic community spread across the globe. As the Diaspora navigates the challenges and opportunities of life abroad, it is imperative that we prioritize their mental health and wellness. Our officers serving at the Kenya Missions Abroad and at the State Department for Diaspora Affairs equally face unique challenges in the mental health and wellness sphere.

This Mental Health Action Plan (2023-2027) underscores the Government's commitment to understanding and addressing the mental health needs of Kenyans living abroad and staff. Mental health issues are often silent adversaries that impact individuals and families in profound ways. The Action Plan therefore sheds light on the prevalence, causes, consequences and proposed solutions to these issues within the target groups.

Furthermore, the publication serves as a call to action for policymakers, healthcare professionals, community leaders, government officials and individuals alike to collaborate in fostering a supportive environment that promotes mental health awareness, access and stigma reduction.

I extend my sincere appreciation to the State Department's staff, the Kenyan Diaspora, Kenya Missions abroad and all stakeholders involved in this important endeavor. Your dedication and expertise are invaluable as we work together to prioritize mental wellness.

As we embark on this journey of understanding and advocacy on mental health, I reaffirm our commitment to the mental health and wellness discourse, and invite all the stakeholders to partner with the State Department in the implementation of the Action plan.

**Roseline K. Njogu, CBS**

**Principal Secretary, State Department for Diaspora Affairs**

## ABBREVIATIONS AND ACRONYMS

CSR	Corporate social responsibility
IDP	Internally Displaced Person
IEC	Information, Education and Communication
KNCHR	Kenya National Commission on Human Rights
PTSD	Post-Traumatic Stress Disorder
SDDA	State Department for Diaspora Affairs
SDGs	Sustainable Development Goals
UN	United Nations
WHO	World Health Organization
VOTs	Victims of Trafficking
MOH	Ministry of Health

## EXECUTIVE SUMMARY

Mental wellness is recognized as essential for individuals to navigate life's challenges with resilience and purpose, affirmed by the World Health Organization (WHO) as a basic human right. Acknowledging the diverse experiences of mental health, efforts have intensified to eliminate stigma surrounding mental illness, given its adverse effects on cognitive functions, substance abuse, and suicidal tendencies. The United Nations' Sustainable Development Goals prioritize mental health alongside physical health, reflecting its critical role in individual development. In Kenya, the Constitution emphasizes the right to healthcare, including mental health services, with policies and action plans aimed at prevention, treatment, and de-stigmatization of mental health conditions.

The Mental Health Action Plan (2023-2027) is devised to address mental wellness among Kenyans abroad, aligning with efforts to safeguard diaspora rights and welfare. By prioritizing mental health, the government aims to empower the diaspora community for healthier, more fulfilling lives.

In the global context, mental health has historically been neglected despite its debilitating effects, contrasting with the robust responses to infectious diseases. While high-income countries have extensively studied mental wellness, lower-income countries, particularly in Africa, lack resources and prioritize other health concerns, with poverty being a significant factor exacerbating mental disorders. Prioritizing mental health alongside other developmental issues is crucial to address the socio-economic impacts of mental disorders.

In Kenya, mental health issues are prevalent but insufficiently addressed, especially among the diaspora, where studies show higher rates of depression and anxiety, compounded by challenges such as limited awareness of mental health resources, language barriers, affordability, cultural competence among providers, stigma, and fear of deportation for undocumented migrants. Addressing these challenges requires strategies focusing on improving access to mental health resources, reducing stigma, and enhancing social support and cultural identity among the target groups.

The State Department's staff express reluctance to share their mental health experiences with colleagues despite being able to interact freely. There are mixed perceptions regarding the ease of

seeking assistance, the adequacy of support from families and colleagues, involvement in mental health programs, and accessing mental health opportunities without job jeopardy.

Kenya Missions' staff lack platforms to discuss mental health concerns with colleagues and report the absence of professional communities for mental health support. They are not involved in mental health programs and face challenges in seeking help for mental health issues.

The Kenya Diaspora Mental Health Action Plan (2023-2027) provides a comprehensive framework aimed at addressing the mental health needs of Kenyan Diaspora communities around the world, Kenyan Missions abroad as well as the State Department for Diaspora Affairs. This action plan outlines strategic actions and investments to promote mental well-being, provide accessible support services, and foster community resilience, in recognition of the unique circumstances and challenges caused by mental health issues.

The following are the priority areas of the Action Plan:

1. Create awareness on Mental health and wellness;
2. Promote mental health and wellness accessibility;
3. Address Mental health and wellness stressors, stigma and discrimination;
4. Provide Counseling services, psycho-social support, and psycho-education for Mental health and wellness; and
5. Strengthen Legal, institutional and regulatory frameworks on Mental health and wellness.

The Kenya Diaspora Mental Health Action Plan demonstrates a proactive and collaborative approach to addressing the mental health needs of Kenyan Diaspora communities worldwide. By prioritizing awareness, accessibility, and culturally competent care, this action plan aims to promote resilience, empower individuals, and foster a supportive environment conducive to mental well-being. Through concerted efforts and sustained commitment, the Kenyan Diaspora community, the State Department for Diaspora Affairs and Kenya Missions abroad can work towards building a healthier and more resilient future for all its members.

## CHAPTER ONE

### Background

Mental wellness encompasses a state of psychological equilibrium where individuals are equipped to navigate life's complex challenges with resilience, self-awareness, and a sense of purpose.

The World Health Organization (WHO) denotes that the state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community, is a basic human right. It also recognizes that mental health is experienced differently from person to person taking into account different triggers with varying levels of difficulty and distress, thus the need for person-centered interventions.

In the past decade, the adverse effects of mental illness such as; impaired cognitive functions, substance abuse, suicidal thoughts and behaviors amongst others, prompted discussions around eliminating the stigma and prejudice around issues of mental wellness.

The United Nations 2030 Agenda for Sustainable Development, adopted in 2015 by all UN Member States, outlines 17 Sustainable Development Goals (SDGs) as a universal call to action. These goals aim to: promote decent work and reduce inequalities (SDGs 8 & 10); strengthen health and education systems (SDGs 3 & 4); eradicate poverty and hunger (SDGs 1 & 2); build peaceful and just societies (SDG 16); protect human rights and promote gender equality and the empowerment of women and youth (SDG 5); and foster global partnerships (SDG 17).

In alignment with SDG 3, which seeks to ensure healthy lives and promote well-being for all at all ages, the State Department for Diaspora Affairs is committed to providing psycho-education, specialized counseling, and Psychological First Aid (PFA) to staff and Kenyans in the diaspora experiencing distress. This supports Target 3.4, which focuses on promoting mental health and well-being.

Furthermore, the United Nations emphasizes the importance of reducing premature mortality from non-communicable diseases by one-third through prevention, treatment, and the promotion of mental health by 2030. This reflects a growing global recognition of the vital role mental wellness plays in personal and societal development

Moreover, the Constitution of Kenya 2010 attaches great importance to the health of every person. Article 43 (1) (a) of the Constitution provides that every person has the right to the highest attainable standard of health, which includes the right to healthcare services, including mental health.

The Kenya Mental Health Policy (2015-2030) envisions a nation where mental health is valued and promoted, mental health conditions are prevented and persons affected by mental health conditions are treated without stigmatization and discrimination. The Policy is alive to the fact that 50% of all mental disorders start by the age of 14 years and 75% by the age of 24 years.

In this regard, the Kenya Mental Health Action Plan 2021-2025 was developed to: strengthen effective leadership and governance for mental health; ensure access to comprehensive integrated and high quality mental health care services at all levels of health care; implement promotive and preventive mental health strategies; and strengthen mental health systems.

The Kenya Foreign Policy of 2014, identifies Diaspora Diplomacy as one of its five pillars and recognizes that the Kenyan Diaspora continue to form an integral part of the Kenyan economy and social fabric. This notwithstanding, Kenyans in the diaspora continue to face various challenges in their lives. The State Department for Diaspora Affairs is therefore mandated, to champion the protection of Kenya's Diaspora rights and promotion of their welfare, under which their overall health and more so mental wellness is addressed.

Further, the Kenya diaspora policy 2024 acknowledges the growing mental health challenges faced by Kenyans living abroad and outlines strategies to address these concerns. The policy is cognizant of an increase in mental health issues among the Kenyan diaspora, attributing this trend to factors such as culture shock, poor working and living conditions, discrimination, and loss of livelihoods. These challenges underscore the need for targeted interventions to support the mental well-being of Kenyans abroad. This anchors the Mental Health Action Plan in promoting mental wellness among the diaspora as part of a broader effort to enhance the welfare of Kenyans living abroad.

Increasing disease burden and the widely acceptable desire to secure health of the citizens continue to influence strategic choices. In a study conducted by Ministry of Health (MOH) (Kenya mental health investment case ) in 2021, mental health conditions costed the Kenyan economy 62.2 billion Kenyan shillings (KES) (US\$ 571.8 million), equivalent to 0.6% of the gross domestic product (GDP) in 2020.

These annual costs include 5.5 billion KES in health care expenditure and 56.6 billion KES in lost productivity due to premature mortality, absenteeism and presenteeism (Ministry of Health, 2021). By acting now, Kenya can reduce the burden of mental health conditions

There has been an increasing in victims of human trafficking globally where Kenya is not an exception for those being taken to Malaysia, Myanmar, Vietnam and Lao Republic. The government Kenya has played a critical in collaboration with Thailand Republic has managed to rescue Victims of human trafficking, specifically 153 were rescued and evacuated from Myanmar between February and March 2025. These victims require counselling services, psychosocial support and smooth reintegration.

The Kenya Diaspora Mental Health Action Plan will serve as a roadmap for promoting mental wellness and improving outcomes for individuals within the diaspora community, Kenya Missions abroad and State Department for Diaspora Affairs staff. By prioritizing mental health and well-being, the Government endeavors to empower the Kenyan diaspora and their families to lead healthier and more fulfilling lives.

## CHAPTER TWO

### **Situational Analysis**

#### **Global context**

For centuries, societies have largely ignored, overlooked, or even demonized and criminalized mental health ailments that can be debilitating. Global responses to infectious health threats, like pandemics, are typically robust and use significant resources. However, the same weight has not been applied to matters of mental wellness.

Global mental health is a growing concern, and receives increased worldwide efforts for the sustainable development of mental health programs. Research has proven mental wellness and disorders is well studied in high-income countries as compared to lower income countries which lack the requisite resources hence prioritize other health concerns. This necessitates the imperative to direct focus on the same disorders in lower income countries.

Poverty has been described as a major impediment to health in low- and middle-income countries especially in Africa. The World Health Report 2001 pointed to the relationship between poverty and mental disorders. Countries in Africa are facing a double burden of disease and insufficient resources, with almost 80% of the continent's countries spending less than 1% of their health budgets on mental health (Njenga, 2002).

East Africa has an estimated population of 130 million and one of the highest population growth rates in the world. The region is, however, grossly under-resourced particularly in relation to human resources for mental health. For example, it has an average of only 0.08 psychiatrists per a population of 100,000 (World Health Organization, 2005).

In a situational analysis of the mental health system in Uganda, conducted as part of the Mental Health and Poverty Project (Kigozi et al, 2007), poverty was identified as a major risk factor for mental illness. Poverty was reported to be a strong causative and mediating factor for mental health problems such as stress, frustrations, anxiety and depression.

Biological and genetic factors play a foundational role in influencing mental health. Individuals with a family history of mental illness may have a heightened predisposition, although heredity does not guarantee that one will develop a condition. Additionally, medical issues such as brain injuries, infections, hormonal imbalances, and substance abuse can contribute significantly to the

onset of mental health problems. The misuse of drugs and alcohol — particularly among diaspora populations - has also been identified as a rising concern, with substances like marijuana and amphetamines known to trigger conditions such as paranoia, psychosis, and mood disorders.

Psychological and personality traits further influence mental health. Early childhood experiences, particularly those involving neglect or abuse, can increase vulnerability to mental illness later in life. Personality factors, including low self-esteem and perfectionism, are often linked to anxiety and depression. In adulthood, traumatic experiences and prolonged stress — such as financial difficulties, domestic violence, or exposure to conflict zones — can severely affect emotional well-being. Kenyans living in countries experiencing civil unrest, such as Sudan, have been particularly impacted.

Social and environmental factors compound these risks. Many Kenyans in the diaspora face culture shock, racial and religious discrimination, and a profound sense of isolation from their communities back home. The pressure to meet high expectations from families and communities — who often view migration as a guaranteed path to success — can lead to disappointment, shame, and stress when those expectations are unmet.

In addition, workplace and migration-related stressors are significant contributors to mental health deterioration. These include the withholding of salaries, confiscation of personal documents, exploitative labor conditions, physical and psychological abuse, and even sexual harassment. Some migrants face detention either before deployment or in preparation for deportation, leading to trauma and fear. Others suffer from sleep deprivation and harsh living conditions that further erode their mental resilience.

In the same line, family dynamics also play a critical role. Separation from loved ones, marital breakdowns, and the lack of shared responsibilities between partners contribute to emotional strain. The absence of strong familial support systems in foreign environments often leaves migrants without the emotional anchors necessary to navigate the challenges of diaspora life. Other major causes of distress include separation with family members, culture shock, weather, human trafficking

Some countries in the East African region such as the Democratic Republic of Congo have experienced war, conflict and genocide over the past three decades. There have been massive

internal and external displacements of people due to strife in the region, resulting in a considerable number of internally displaced persons (IDPs) and refugees. For instance, Kenya is home to some of the largest refugee populations in the world, mainly from the neighboring countries of Ethiopia, the Democratic Republic of Congo, Somalia and southern Sudan. Studies conducted in the region and elsewhere indicate that post-traumatic stress disorder (PTSD), depression, suicide, alcohol and drug use markedly increase in post-war environments (Musisi, 2004).

These findings highlight the need to prioritize mental health alongside other developmental concerns to enable the creation of tailored programs aimed at tackling the socio-economic difficulties arising from or contributing to mental disorders.

### **Kenyan Context**

According to KNCHR 2011, the prevalence of mental health, Neurological and Substance use in Kenya is not adequately covered. KNCHR estimates that 25% of outpatients and up to 40% of patients in Kenyan health facilities suffer from mental conditions.

The Kenyan Diaspora represent a segment of the Kenyan population that extends beyond the borders of Kenya, yet remains culturally, socially, and economically tied to their homeland. As such they are not exempt to the intricacies of life among them issues revolving around mental wellness.

There are a number of studies that have explored the mental health of Kenyans in the diaspora. A study on the mental health of Kenyan women in the diaspora found higher rates of depression, anxiety, and stress compared to Kenyan women living in their home country. It also indicated that Kenyans in the diaspora are less likely to seek help for mental health problems (Ngugi AK et al:2019).

Additional studies indicate that social support is a key factor in promoting mental health wellness for Kenyans in the diaspora. The study found that Kenyans in the diaspora who have strong social support networks are less likely to experience depression and anxiety (Onyango et al:2020). Cultural identity is also a key factor in promoting mental health wellness for Kenyans in the diaspora. Kenyans in the diaspora who have a strong sense of cultural identity are less likely to experience depression and anxiety (Ndeti et al:2021)

There are a number of challenges that Kenyans in the Diaspora face especially with regard to mental health issues and as a result, this can make it difficult to cope with the challenges of living in a new country;

1. The Kenyan diaspora may lack sufficient awareness on the importance of mental health and wellness and as such may be unable to identify and address the issues once they crop up.
2. The Kenyan diaspora have insufficient platforms that promote awareness of systems that address issues surrounding mental wellness and also face barriers such as financial limitations that may restrict them from getting the assistance they require.
3. There is still a stigma associated with mental illness in many cultures, including Kenyan culture. This can prevent people from seeking help for mental health problems. Migrants may face stigma associated with mental illness, more often brought about by societal norms and beliefs such as the belief that mental illness is a sign of weakness or personal failing.
4. Inadequate skilled personnel in matters of mental health to address mental health issues especially in Kenya Missions.
5. Inadequate mental wellness structures and policies in host countries in places of employment or in various areas of residences is a challenge that the Kenyan Diaspora faces

This suggests that there is a need to develop and implement strategies to promote mental health wellness for Kenyans in the diaspora. These strategies should focus on increasing access to mental health resources, reducing stigma, and promoting social support and cultural identity.

## **CHAPTER THREE**

### **Strategic Focus Areas**

This chapter highlights the Strategic Focus Areas which were informed by the key findings and recommendations of the research on mental health, conducted by the State Department for Diaspora Affairs. The key findings of the study were as follows:

#### **1. Prevalence of Mental Health Issues**

The research highlighted a concerning prevalence of mental health issues among Kenyans in the diaspora, staff at the State Department for Diaspora Affairs, and staff in Kenya Missions abroad. Despite efforts to maintain contact with family and society, individuals in these groups experience various challenges including substance abuse, physical illnesses, work-related conflicts, absenteeism, and withdrawal from daily activities. This underscores the importance of addressing mental health support for Kenyan diaspora communities and personnel working in diplomatic missions to ensure their well-being and productivity.

#### **2. Stress Factors**

The research identifies common stress factors among Kenyans in the diaspora, staff in the State Department, and staff in Kenya Missions abroad. Economic factors and poor working conditions are consistently cited as primary stressors across all groups. Additionally, issues such as work-life balance, workplace profiling, hereditary disposition, and gender dynamics contribute to mental health challenges. Despite adaptations to new cultures and environments, these stress factors remain significant, highlighting the need for targeted interventions and support systems to address mental health issues in these populations.

#### **3. Availability, Accessibility, and Awareness**

For Kenyans in the diaspora, while they can recognize mental health issues among their circles, they lack a supportive social lifestyle and accessible mental health interventions due to cost and limited availability of rehabilitation centers.

The State Department's staff report better access to mental health services and awareness through workplace training, but they are unsure about the affordability of mental health treatments covered by employer insurance.

Kenya Missions' staff, on the other hand, lack training and awareness on mental health issues in the workplace. They also face challenges accessing mental health services due to cost and limited availability. Additionally, there's a lack of support systems for individuals with mental health issues in foreign countries, and many are unaware of existing mental health programs at their workplace.

#### **4. Barriers to Access**

Kenyans in the diaspora face stigma surrounding mental health issues, leading to reluctance to seek help due to fear of isolation. Additionally, racial barriers such as language and cultural differences hinder access to mental health services. There's also a lack of trust in mental health facilities, exacerbated by the perception that host countries do not adequately address the unique mental health concerns of foreigners.

The State Department's staff have access to counseling facilities at work but still encounter workplace stigma surrounding mental health. Employees may avoid seeking help due to this stigma, despite the availability of quality mental health services in the country.

Kenya Missions' staff, however, lack counseling facilities in the workplace, which contributes to the difficulty in accessing support. Cultural barriers, including language and cultural differences, further impede employees from seeking assistance. Additionally, there's a perception that host countries do not adequately address the mental health needs of foreigners, and the quality of available mental health facilities is uncertain.

#### **5. Experience**

Kenyans in the diaspora find it challenging to seek help for mental health issues and lack opportunities to share experiences with family and colleagues for support. They are not involved in mental health programs and face difficulties accessing services without risking their employment. Missions are unable to provide assistance with mental health issues, and there's uncertainty about taking study or medical leave for mental health recovery.

#### **Recommendations of the Study**

The key recommendations of the study were as follows:

***Promote Mental Health Awareness:*** The State Department should enhance awareness creation on mental health issues within the Kenyan diaspora community, staff at SDDA and Missions abroad through tailored outreach programs, workshops, and informational campaigns. Further, it is important to destigmatize mental illness and increase knowledge on available resources while encouraging individuals to seek help when needed.

***Accessible Support Services:*** It was recommended that the State Department engages with the Diaspora Association leaders so as to enhance the communal aspect of providing support to Kenyans. Further, there is a need to ensure access to mental health services as a central focus in both the private and public spheres.

In addition, helplines, in-person and online counseling platforms and support groups should be established and tailored to the needs of the target groups. Efforts can be made to collaborate with existing mental health organizations and professionals to expand service availability.

***Crisis Intervention and Trauma Support:*** Establish rapid response mechanisms to provide immediate assistance during emergencies and long-term support programs to address the psychological effects of trauma. In addition, designated areas should be established for offering psychological debriefings to returnees.

***Capacity Building and Training:*** Capacity building initiatives should be put in place to ensure continuous training and sensitization to SDDA staff, mental health champions and Diaspora association leaders. Training of Foreign Services Officers in at least one foreign language is also recommended.

***Collaboration and Partnerships:*** Partnerships should be built among mental health organizations, community leaders, government agencies and other stakeholders to create a coordinated approach to mental health support.

Additionally, funding support from state and non-state players is crucial to sustain research efforts in this field.

***Advocacy and Policy Reform:*** It is crucial to come up with advocacy efforts directed towards policy reforms that prioritize mental health. This includes advocating for culturally sensitive mental health services, insurance coverage for mental health treatment and psychoeducation.

**Areas for further research:** The research recommended an expansion of the scope of other research to collect information from the diaspora returnees and therefore inform areas such as pre departure training areas on psychoeducation.

**Pre-surveys and studies:** Pre-surveys and studies should be conducted to uniquely craft research mechanisms for each region. It is recommended that the State Department conduct longitudinal studies to track changes in mental health over time so as to enable more understanding on the effects of migration and acculturation. By collecting data and conducting studies, policymakers will gain valuable insights to inform targeted interventions and allocate resources effectively.

### **Strategic Focus Areas**

The following key strategic focus areas were arrived at based on the above findings and recommendations:

- a. Create awareness on Mental health and wellness
- b. Promote Mental health and wellness accessibility
- c. Address Mental health and wellness stressors, stigma and discrimination
- d. Provide Counseling services, psycho-social support, and psycho-education for Mental health and wellness
- e. Strengthen Legal, institutional and regulatory frameworks on Mental health and wellness

### **Strategic Focus Area 1: Create awareness on mental health and wellness**

- a. Organize meetings to sensitize Mission staff and the Kenyan diaspora on mental health and wellness
- b. Develop IEC materials on mental health and wellness
- c. Sensitize the staff and Kenyans locally as well as Kenyan diaspora on SHIF or other medical covers that cater for mental health issues
- d. Briefing of staff on mental health during staff trainings and induction courses
- e. Undertake CSR in organizations dealing with needy Kenyans (e.g. children homes)
- f. Engage key stakeholders to create linkages on mental health and wellness matters
- g. Coordinate the equipping of SDDA staff with basic skills of host country language and regulations
- h. Sensitize Kenyans in the diaspora on culture and patriotism

- i. Enhance collaboration and partnerships with players within the space i.e. Legal awareness

**Strategic Focus Area 2: Promote Mental health and wellness accessibility**

- a. Facilitate staff to access facilities for enhanced physical and mental well being
- b. Identify and train Mental Health champions
- c. Sensitize staff and Kenyan diaspora on the importance of undertaking regular medical check ups
- d. Refer for psychological assessment and recommend rehabilitation for employees in drug and substance use
- e. Link officers with health and addiction challenges to support groups

**Strategic Focus Area 3: Address Mental health and wellness stressors, stigma and discrimination**

- a. Undertake sensitization on ending stigma and discrimination of individuals with mental health issues
- b. Sensitize the Kenyan diaspora and SDDA staff on triggers to mental health issues
- c. Equip employees with coping and self-care skills and promote supportive working environment

**Strategic Focus Area 4: Provide Counseling services, psycho-social support, and psycho-education for Mental health and wellness**

- a. Provide Counseling services and psychosocial support to the Kenyan diaspora, SDDA staff and their families
- b. Provide psycho-education to staff, Kenyan diaspora and their families
- c. Undertake visitations and provide counseling services to Kenyans convicted in other countries
- d. Capacity build officers posted to Missions and staff at SDDA, who deal directly with distress cases, with basic counseling skills
- e. Promote healthy practices and offer practical solutions to identified problems with an aim of increasing productivity
- f. Hold sensitization forums on drug and substance use

- g. Provide psychological first aid /debriefing to staff through grief therapy, counseling and other trauma management tools
- h. Promote good interpersonal relations among staff
- i. Sensitize staff and Kenyan diaspora on life skills
- j. Sensitize staff and Kenyan diaspora on communicable and non-communicable diseases that may prompt mental health issues
- k. Provide counseling services to distressed Kenyan diaspora returnees

**Strategic Focus Area 5: Strengthen Legal, institutional and regulatory frameworks on Mental health and wellness**

- a. Adopt and customize the National Guidelines on Workplace Mental wellness

### Implementation Matrix

Activities	Output	Indicators	Baseline	Time Frame					Estimated Budget (Kshs. millions)
				FY 1	FY 2	FY 3	FY 4	FY 5	
<b>Strategic Focus Area 1: Promote Mental health and wellness accessibility</b>									
Facilitate staff to access facilities for enhanced physical and mental well being	Staff engaged in physical and mental wellbeing activities	Proportion (%) of staff engaged	0	100	100	100	100	100	75
Identify and train Mental Health champions	Mental Health Champions identified and trained	No. of champions	16	41	41	41	41	41	75
Sensitize staff and Kenyan diaspora on the importance of undertaking regular medical check ups	Staff and Kenyan diaspora sensitized	No. of Staff and Kenyan diaspora sensitized	0	200	200	200	200	200	40
Refer for psychological assessment and recommend rehabilitation for employees in drug and substance use	Employees in drug and substance use recommended for rehabilitation	Level (%) of uptake	0	100	100	100	100	100	2
Link officers with health and addiction challenges to support groups	Officers linked to support groups	Level (%) of cases handled	0	100	100	100	100	100	2
<b>Strategic Focus Area 2: Create awareness on Mental health and wellness</b>									
Organize meetings to sensitize Mission staff and the Kenyan diaspora on mental health and wellness	Meetings organized	No. of meetings	2	1	1	1	1	1	45
		No. of persons sensitized	100	200	200	200	200	200	
Develop IEC materials on mental health and wellness	IEC materials developed and disseminated	No. of people accessing IEC materials	0	1000	3000	6000	8000	10000	65

Activities	Output	Indicators	Baseline	Time Frame					Estimated Budget (Kshs. millions)
				FY 1	FY 2	FY 3	FY 4	FY 5	
Sensitize the Kenyan diaspora on SHIF or other medical covers that cater for mental health issues	Kenyan diaspora sensitized on SHIF or alternative medical covers	No. of Kenyans in the diaspora sensitized	0	200	200	200	200	200	2
Briefing of staff on mental health during staff trainings and induction courses	Staff briefed on mental health during trainings /induction programmes	No. of staff briefed	0	50-	50	50	50	50	2
Undertake CSR in organizations dealing with needy Kenyans (e.g. children homes)	CSR undertaken in organizations dealing with needy Kenyans	No. of organizations reached	0	1	1	1	1	1	25
Engage key stakeholders to create linkages on mental health and wellness matters	Key Stakeholders engaged	No. of stakeholders engaged	0	30	30	30	30	30	10
Coordinate the equipping of SDDA staff with basic skills of host country language and regulations	Training coordinated	No. trainings undertaken	0	1	1	1	1	1	5
Sensitize Kenyans in the diaspora on culture and patriotism	Kenyan diaspora sensitized	No. of forums	0	1	1	1	1	1	2
		No. of Kenyan diaspora sensitized	0	100	100	100	100	100	
Enhance collaboration and partnerships with players within the space i.e. Legal awareness	Kenyan diaspora sensitized on legal issues of host country to avoid distress issues associated with noncompliance	No. of Forums	0	1	1	1	1	1	
		No. of Kenyan Diaspora sensitized	0	100	100	100	100	100	

Activities	Output	Indicators	Baseline	Time Frame					Estimated Budget (Kshs. millions)
				FY 1	FY 2	FY 3	FY 4	FY 5	
<b>Strategic Focus Area 3: Address Mental health and wellness stressors, stigma and discrimination</b>									
Undertake sensitization on ending stigma and discrimination of individuals with mental health issues	Sensitization undertaken	No. of forums	0	1	1	1	1	1	2
Sensitize the Kenyan diaspora and SDDA staff on triggers to mental health issues	Kenyan diaspora and SDDA staff sensitized on triggers to mental health issues	No. of persons sensitized	0	200	200	200	200	200	10
Equip employees with coping and self-care skills and promote supportive working environment	Staff sensitized	No. of staff sensitized	0	50	50	50	50	50	10
<b>Strategic Focus Area 4: Provide Counseling services, psycho-social support, and psycho-education for Mental health and wellness</b>									
Provide Counseling services and psychosocial support to the Kenyan diaspora, SDDA staff and their families	Counseling services and psychosocial support provided	Proportion of requests handled (%)	100	100 %	100 %	100 %	100 %	100 %	1
Provide psycho-education to staff, Kenyan diaspora and their families	Psycho-education offered to staff, Kenyan diaspora and their families	No. of staff served	55	100	100	100	100	100	30
		No. of Kenyans in the diaspora served	200	250	300	350	415	450	2
Undertake visitations and provide counseling services to Kenyans convicted in other countries	Visitations and counseling undertaken	No. of prisons visited	0	1	1	1	1	1	30

Activities	Output	Indicators	Baseline	Time Frame					Estimated Budget (Kshs. millions)
				FY 1	FY 2	FY 3	FY 4	FY 5	
Capacity build officers posted to Missions and staff at SDDA, who deal directly with distress cases, with basic counseling skills	Staff equipped with basic counseling skills	No. of staff capacity built	0	100	100	100	100	100	2
Promote healthy practices and offer practical solutions to identified problems with an aim of increasing productivity	Healthy practices promoted and practical solutions identified	No. of Team building activities	0	1	1	1	1	1	20
		Job rotations and placements (%)	0	100	100	100	100	100	0
		No. of practical solutions offered(%)	0	100	100	100	100	100	0
Hold sensitization forums on drug and substance use	Sensitization forums held	No. of forums	1	1	1	1	1	1	2
		No. of participants	55	100	100	100	100	100	
Provide psychological first aid /debriefing to staff and distressed Kenyan diaspora through grief therapy, counseling and other trauma management tools	Psychological first aid/ debriefing provided to staff	Level (%) of staff assisted	100	100	100	100	100	100	
Promote good interpersonal relations among staff	Staff capacity built on good interpersonal relations	No. of forums	0	1	1	1	1	1	2
		No. of staff	0	100	100	100	100	100	

Activities	Output	Indicators	Baseline	Time Frame					Estimated Budget (Kshs. millions)
				FY 1	FY 2	FY 3	FY 4	FY 5	
Sensitize staff and Kenyan diaspora on life skills	Staff and Kenyan diaspora sensitized on life skills	No. of sensitization forums held	0	1	1	1	1	1	2
Sensitize staff and Kenyan diaspora on communicable and non-communicable diseases that may prompt mental health issues	Staff and Kenyan diaspora sensitized on communicable and non-communicable diseases	No. of persons sensitized	0	100	100	100	100	100	2
Provide counseling services to Kenyans in distress and diaspora returnees i.e. Victims of Human Trafficking and survivors of war-torn areas	Counseling services offered to returnees on need basis	Level (%) of returnees counseled	100	100	100	100	100	100	2
<b>Strategic Focus Area 5: Strengthen Legal, institutional and regulatory frameworks on Mental health and wellness</b>									
Adopt and customize the National Guidelines on Workplace Mental wellness	Workplace mental wellness Committee established and operationalized	Operational Committee	0	1	-	-	-	-	2
	Workplace Mental Wellness policy developed, disseminated and implemented	Policy	0	-	1	-	-	-	25
		M&E Reports	0	0	1	1	1	1	35