



Mental Health Strategic Planning and Coordination Unit: 2025

The MoPD&SI set up the [MHSP&C Unit](#) this year to establish an institutional framework and launch mental health as a national priority. Aligned with its ToRs, the unit is supporting a national steering and coordination mechanism; offering technical expertise to the governmental (provincial and federal) & non-governmental entities; addressing gaps & identifying opportunities; and strengthening national and provincial mental health systems.

Coordination with key stakeholders

The Unit led extensive coordination with federal and provincial governments, UN agencies, and development partners, supporting MHPSS coordination mechanisms through the following events:

1. [Launch of the MHPSS 5-year Implementation Plan \(2025-2030\)](#)
2. [First national MHPSS coordination meeting](#)
3. [Second national MHPSS coordination meetings](#)
4. [Implementation of MHPSS services in Khyber Pakhtunkhwa](#)
5. [Implementation of MHPSS services in Balochistan](#)

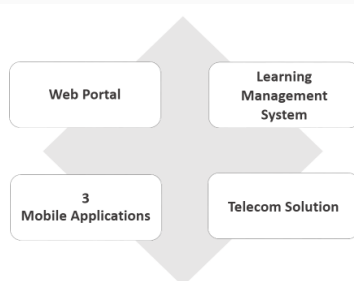
Provided technical support

1. To develop a comprehensive 5-year National MHPSS Implementation Plan, using the Implementation Science Framework, outlining the step-wise work plan to implement the MHPSS model.
2. To the Health Departments in Khyber Pakhtunkhwa, Balochistan, and Gilgit-Baltistan to implementation of MHPSS pilot services.
3. To MoNHSR&C to dedicate funds for developing MHPSS implementation plans (2026-2028).
4. To the Health Department, Balochistan to dedicate funds for developing MHPSS implementation plans (2025-2026).
5. [To SRH and GBV working groups to integrate MHPSS into their responses](#)

The MHPSS model

Strengthened the MHPSS model by revising and updating the digital tools, including:

[MHPSS website](#), [Hamdard Force](#), [MyCare+](#), [mhGAP-HIG-PK](#)



Capacity building

The following workforce has been trained and is providing pilot services in three provinces:

1. 18 mental health specialists trained as trainers.
2. Over 200 primary care physicians trained to manage common mental disorders in the primary care.
3. 15 clinical psychologists as Hamdard Force supervisors and providing psychosocial services at Tier 2.
4. 10 Hamdard Force coordinators in GB, facilitated Hamdard Force trainings.
5. Over 450 community members as Hamdard Force, identifying and referring people with mental disorders in the community.
6. Over 2000 cases have been referred to the MHPSS portal from the community and primary care.

Our Impact



2336

People who received services



473

Trained community mental health workers



222

Trained primary healthcare workers

Peer reviewed publications



Implementing the mhGAP-HIG: the process and evaluation of training primary healthcare workers in Khyber Pakhtunkhwa, Pakistan

Published online by Cambridge University Press: 10 September 2025

[Asma Humayun](#) and [Arooj Najmussaqib](#)

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Outline

[Abstract](#)

[Keywords](#)

1. Introduction
2. Method
3. Results
4. Discussion

[CRediT authorship contribution statement](#)



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Supervision-based evaluation of primary healthcare workers' performance after mhGAP-HIG training in Pakistan

[Asma Humayun](#), [Arooj Najmussaqib](#), [Noor ul Ain Muneeb](#)

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Developing and feasibility testing of Hamdard Force: an intervention to build the capacity of a community mental health workforce in Pakistan

Research | [Open access](#) | Published: 11 December 2025  
article number, (2025) [Cite this article](#)

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Reports & dissemination

1. Regular reports on the implementation of MHPSS in KP, Balochistan, and Baltistan
2. [32 e-newsletters](#) sent to nearly 2000 key stakeholders
3. Regular updates on social media pages: [LinkedIn](#), [X](#), and [Facebook](#)