

WELLNESS CENTRE REPORT- SPRING 2023

By Suha Tariq
Mental Health Counselor
Wellness Centre
Institute of Business Management

IoBM Wellness Center

Introduction

The establishment of a “Wellness Center” at IoBM is aimed to foster the well-being and mental health of the students. The main purpose is to help students to succeed and improve by providing support for the psychological, emotional, social, and behavioral issues. The Wellness Center provided face to face counselling to the students. In addition to this online counseling services were also provided to ensure that students seek help with trust and anonymity for their mental health concerns.

We aimed to empower students with appropriate tools, information and skills so that they could make their life meaningful and can invest in their present and future well-being. This center will enable us:

- Raising awareness about mental health.
- Reducing stigma associated with mental illness.
- Promote help seeking behaviors and emotional well-being practices.
- Helps to recognize early signs and risks of mental illness.
- Practice and promote positive living.
- Improved self-esteem and self-confidence.
- Better ability to manage stress effectively.

A web version of a basic screening inventory (test) was created to assess the emotional (mental) state of the individual who wants to avail this service. This assessment helped us to understand what kind of support a person requires, so we could provide the necessary assistance.

After completing the test (questionnaire) with the client’s true feelings and mental state. A suitable plan was devised in a meaningful treatment /support plan for students and faculty members. After completing the test, they were guided through email about the next course of action that led to appointment with IoBM’s Mental Health Counsellor. The email that they received contained the specific appointment day and time.

Confidentiality

Any information provided here is secure and is not accessible by any unauthorized personnel. The only people other than you who can access this information is IoBM's Mental Health Counsellor. Therefore, be confident that your privacy is ensured.

Appointment Portal and Responses

Since my appointment as Mental Health Counselor at the newly established Wellness Centre, I have conducted 72 counselling sessions of IOBM students and faculty members. Out of the 72 sessions, only two students attended online sessions while the rest opted for in person sessions. Some of the students who opted for online sessions did not attend for reasons they did not mention. The overwhelming majority wanted in person sessions. Some of the students scheduled appointments but did not show up and wanted to reschedule for various reasons like exams, extra classes etc. Since the appointment portal was set up on the official IOBM website. The response from the student population was overwhelming. The appointments were made by students from various departments of the university from BBA, Accounting and Finance, Supply Chain, Economics, Business and Psychology. Media Studies etc. Students enrolled in the graduate programs also made appointments.

Since the announcement was posted on the university website, most of the student population were unaware of this facility so students mostly came to the Wellness Centre through word of mouth from people who had attended a session.

Intern Responsibilities

Miss Rabiya Javed, an intern at the Wellness Centre. I was responsible for guiding and teaching basic assessment procedures. She assisted me throughout my time at the Wellness Centre in scheduling appointments and emailing. A great help to the Wellness Centre in assisting me in handling clients and dealing with overlapping and rescheduling appointments.

Psychological stressors and complaints of students

The nature of complaints and issues of the student population were of a severe distressing nature. The complaints included students having to live in families where domestic violence occurs and having to navigate in dysfunctional families, financial stress because of the plummeting economy, employment worries, symptoms of depression and anxiety that required psychiatric intervention, eating disorders, self-harm such as self-mutilation, lack of emotional regulation, cases of sexual abuse my family members, physically, emotionally abusive parents, along with academic stress and interpersonal problems such loss of relationships and conflicts in their peer groups. Some of the problems required more attention, like in cases of sexual abuse, panic attacks and severe symptoms of depression. They had to be referred to psychologists and psychiatrists so they could benefit from more attention. Because of the limited availability of slots and timings and size of the student body, most of the students had to struggle to book further appointments. Some of the students did manage to have more than one session.

During my tenure at the Wellness Centre, I have experienced many students who have a strong need for an emotional outlet. They have expressed that verbally. Since most of the students are not employed, they cannot afford to see a private psychologist because of the high fees. So, the presence of a mental health counselor on the campus proved to be a beneficial option for the student population in terms of both finances and convenience.

Complaints among male students/clients

Male students came in with complaints of experiencing stress, anxiety, depressive symptoms related to academics, issues with their choice of major, overthinking, pressure to find employment in these chaotic times and mostly intrinsic pressure to support their families. Some came with issues related to experiencing distress related to impersonal relationships and needing clarity. These issues have affected their functioning in all areas of their lives be it social, academic, family life as well as personal. Mental stress such as pressure, overthinking and anxiety has manifested in some students' bodies physically. They were psychoeducated on the mind body connection. Coping techniques such as relaxation, meditation techniques and cognitive reframing of their negative thoughts were instructed to them.

Complaints among female students/clients

Most female students came with a plethora of severe distressing complaints of experiencing neglect, abuse both emotional and verbal, living in households where domestic violence has been the norm. Having grown up with unchecked trauma symptoms needed immediate attention. A few cases came with complaints of experiencing sexual abuse at the hand of close relatives. Clients with these issues seem to be suffering from symptoms of trauma like flashbacks, panic attacks, lack of emotional regulation, nightmares, somatic concerns of bodily pain, mood irritability, feeling numbness and major depressive symptoms. Some of them had to be referred to private psychologists and psychiatrists because their symptoms need pharmacotherapy as well as long term psychotherapy. I followed up with their cases for updates. Along with these issues some women came with experiencing distress on having PCOS (Polycystic ovary syndrome), which made them consistently irritable, moody and sad. Some had issues with their overly restrictive and controlling parents which made them feel suffocated, constantly stressed and anxious. Overthinking and self-doubt have been a persistent problem encountered among all students. Some female student came with issues related to low self-confidence, low self-esteem and lack of self-love. Some wanted counselling on having trouble in being expressive and vulnerable, finding difficulty in opening to people. They needed guidance on how to be more self-aware and not bottle

up emotions. All these issues affect their daily functioning among all avenues of their lives be it academic, social or personal. Psychoeducation along with teaching healthy coping strategies, cognitive restructuring of negative thoughts, exercises related to self-love, self-doubt and a safe space to vent and share their problems was provided to them.

Lack of awareness among Pakistani population

Since there was a serious lack of mental health awareness, in Pakistan, the population has grown up without adequate coping skills to tolerate stress, allowing themselves to be vulnerable, sharing problems, expressing uncomfortable emotions and having serious mental health concerns being listened to and validated. This has not been a general norm among Pakistani households, along with lack of mental health resources. Because of all this, generations of Pakistanis have grown up with intergenerational trauma that has been passed down, offspring to offspring. The consequences are right in front of us and proven with the complaints or symptoms of the student population. That is why a serious need for persistent Mental Health expert at the University is needed.

Throughout my tenure I have conducted **72** sessions of **47** students and faculty members.

Sessions in February	Males	Females
2	1	1

Sessions in March	Males	Females
32	8	17

Sessions in April	Males	Females
23	1	14

Sessions in May	Males	Females
15	3	2

Total Sessions	Males	Females
72	13	34