THE STATE OF MENTAL HEALTH IN SIERRA LEONE
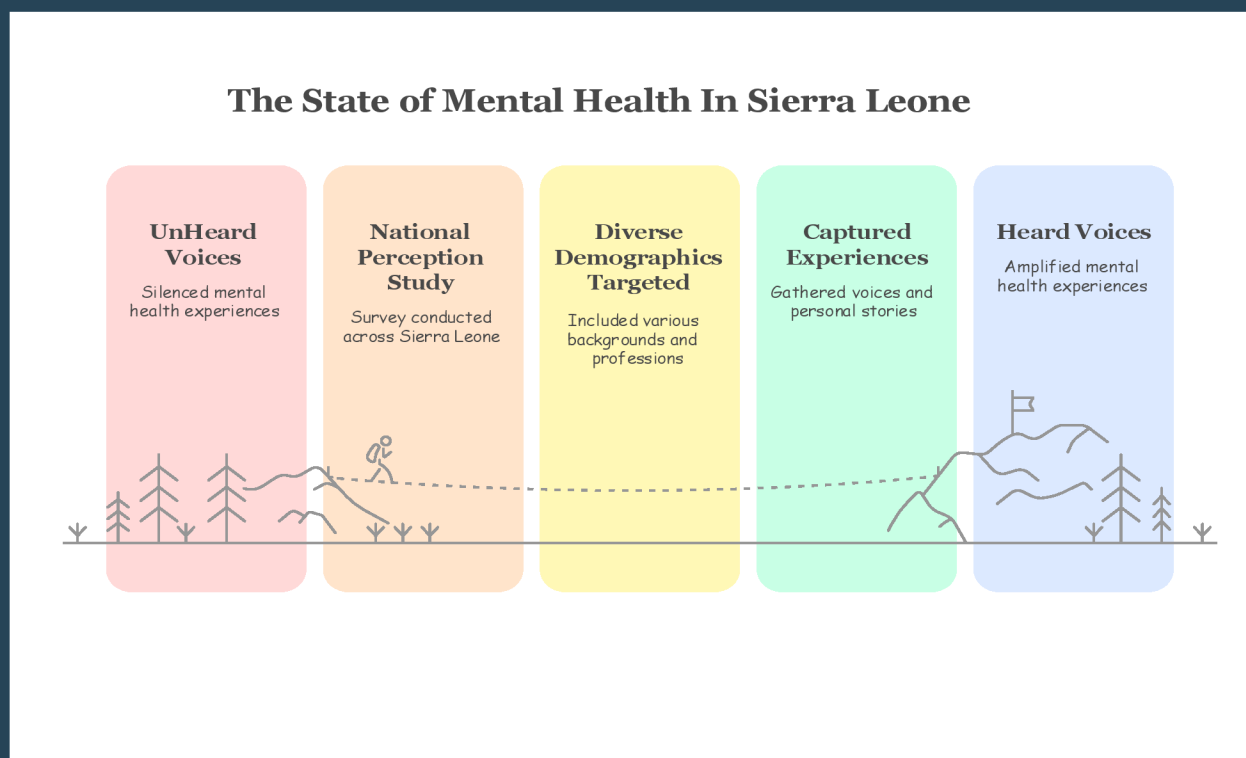
Voices After The Conversations

MENTAL HEALTH IMPACT NETWORK

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1. INTRODUCTION

The State of Mental Health In Sierra Leone

UnHeard Voices	National Perception Study	Diverse Demographics Targeted	Captured Experiences	Heard Voices
Silenced mental health experiences	Survey conducted across Sierra Leone	Included various backgrounds and professions	Gathered voices and personal stories	Amplified mental health experiences

Over the past four weeks, a national perception study on the state of mental health was conducted across Sierra Leone, titled: **"The State of Mental Health in Sierra Leone: Voices After the Conversation."** The goal was to center the voices, experiences, and mental health priorities of everyday people, especially following the public conversations on Mental Health Awareness held in May 2025 and June 2025.

The survey engaged individuals from diverse demographics and professions across the country, exploring how mental health is experienced and discussed in personal, social, and institutional contexts. It also examined the barriers that prevent people from seeking help and the kinds of support respondents believe are most urgently needed.
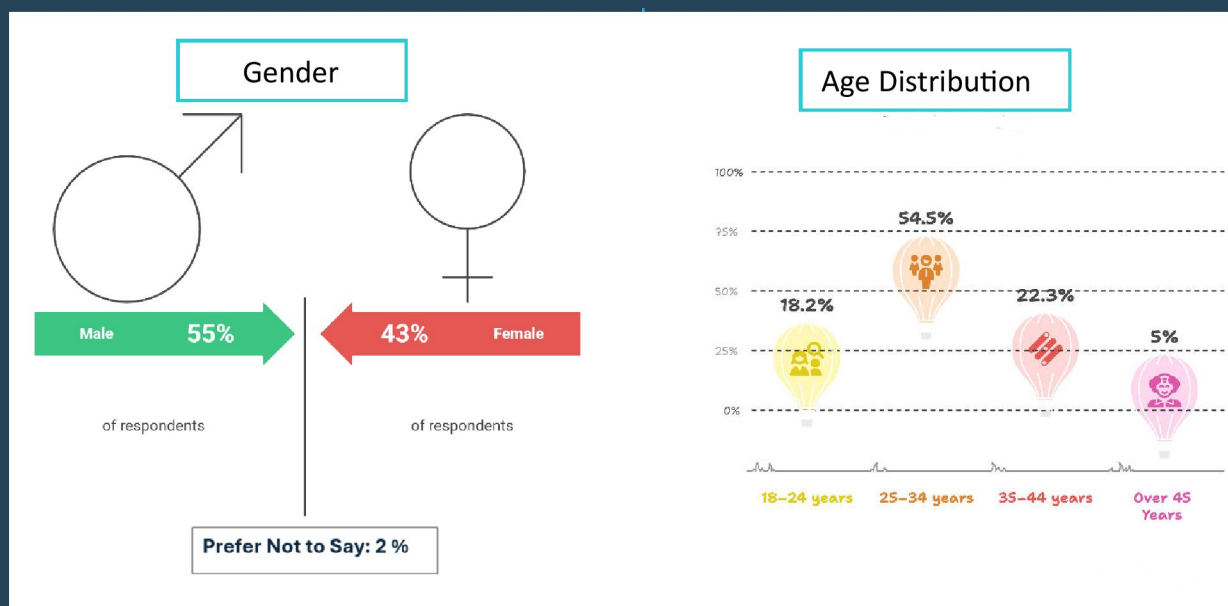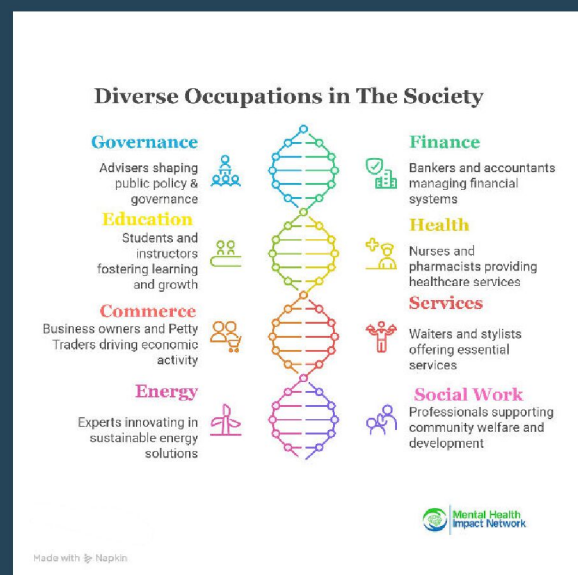
This report shares findings on mental health awareness, self-rated well-being, access to support, and the major gaps and solutions identified by participants. It reflects a growing demand for mental health to be taken seriously, as a national issue requiring collective attention and action.

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2. PARTICIPANT DEMOGRAPHICS

Most of our respondents were between 25 and 34 years old, with a strong male majority. The majority resided in Western Area Urban, though we also received input from the Eastern Area, Kono, Makeni, Kalaba, Western Rural, and The Diaspora.

Occupational Role in society: Respondents represented a wide spectrum of occupational sectors, reflecting the diversity of roles within society. These ranged from students, wellness instructors, and service providers to bankers, analysts, educators, and public servants. This occupational spread underscores the importance of inclusive mental health solutions that resonate across all sectors; governance, education, finance, health, commerce, energy, services, and social work.

Diverse Occupations in The Society

Governance
Advisers shaping public policy & governance

Finance
Bankers and accountants managing financial systems

Education
Students and instructors fostering learning and growth

Health
Nurses and pharmacists providing healthcare services

Commerce
Business owners and Petty Traders driving economic activity

Services
Waiters and stylists offering essential services

Energy
Experts innovating in sustainable energy solutions

Social Work
Professionals supporting community welfare and development

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Made with Napkin

Gender

Male 55% of respondents

43% Female of respondents

Prefer Not to Say: 2 %

Age Distribution

100%
54.5%
18.2%
22.3%
5%

18–24 years   25–34 years   35–44 years   Over 45 Years

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3. CURRENT STATE OF MENTAL HEALTH

Participants were required to rate their mental health on a scale of 1 to 10. The majority view their mental health as low to moderate, with very few ratings it as high, pointing to deeper emotional or psychological burdens.

❖ **Low to Moderate (4–6 out of 10):**
   63.7% of participants rated their mental health in this range
   - 36.4% rated it 4/10 (low)
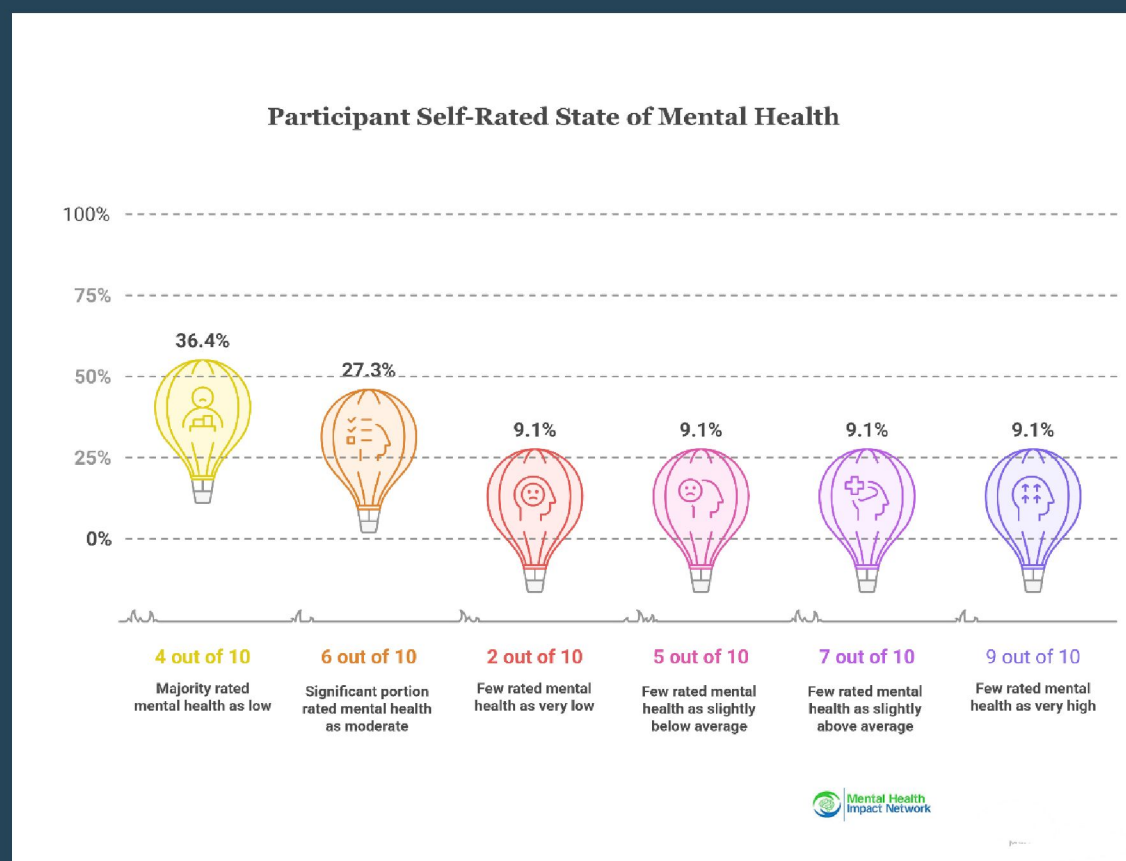   - 27.3% rated it 6/10 (moderate)
❖ **Below Average to Very Low (2–5 out of 10): 18.2%** fell into this category
   o 9.1% rated it 2/10 (very low)
   o 9.1% rated it 5/10 (slightly below average)
❖ **Above Average to Very High (7–9 out of 10):** Only **18.2%** reported stronger well-being
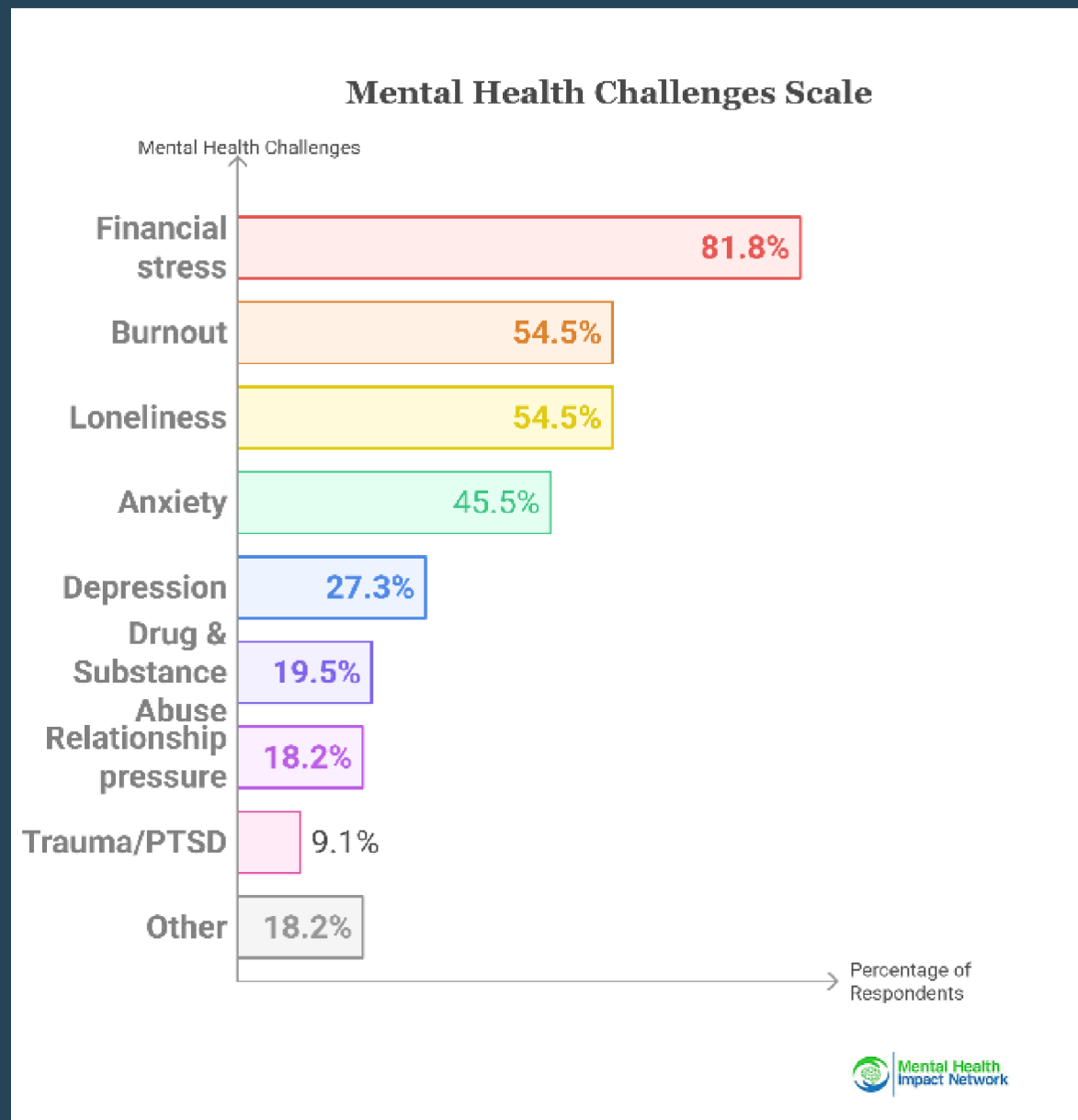   o 9.1% rated it 7/10 (slightly above average)
   o 9.1% rated it 9/10 (very high)

This suggests a significant gap between perceived normalcy and overall well-being, with underlying challenges persisting beneath the surface.

Participant Self-Rated State of Mental Health

4 out of 10	6 out of 10	2 out of 10	5 out of 10	7 out of 10	9 out of 10
36.4%	27.3%	9.1%	9.1%	9.1%	9.1%
Majority rated mental health as low	Significant portion rated mental health as moderate	Few rated mental health as very low	Few rated mental health as slightly below average	Few rated mental health as slightly above average	Few rated mental health as very high

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4. MENTAL HEALTH CHALLENGES

More than 80% of respondents reported experiencing financial stress. Burnout, loneliness, and anxiety were also commonly mentioned. Drug and Substance abuse is also uniquely mentioned.
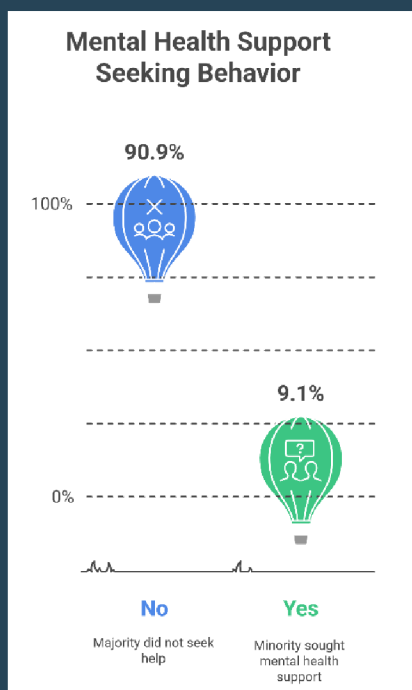
These issues often go unspoken but they are present across all demographics.

Mental Health Challenges Scale

Mental Health Challenges

Challenge	Percentage
Financial stress	81.8%
Burnout	54.5%
Loneliness	54.5%
Anxiety	45.5%
Depression	27.3%
Drug & Substance Abuse	19.5%
Relationship pressure	18.2%
Trauma/PTSD	9.1%
Other	18.2%

Percentage of Respondents

5. ACCESS TO MENTAL HEALTH SUPPORT

Despite these struggles, 91% of respondents have **never sought professional mental health support**. Among those who did, most turned to faith-based or informal peer support. No one reported using a locally certified therapist or formal online mental health service.
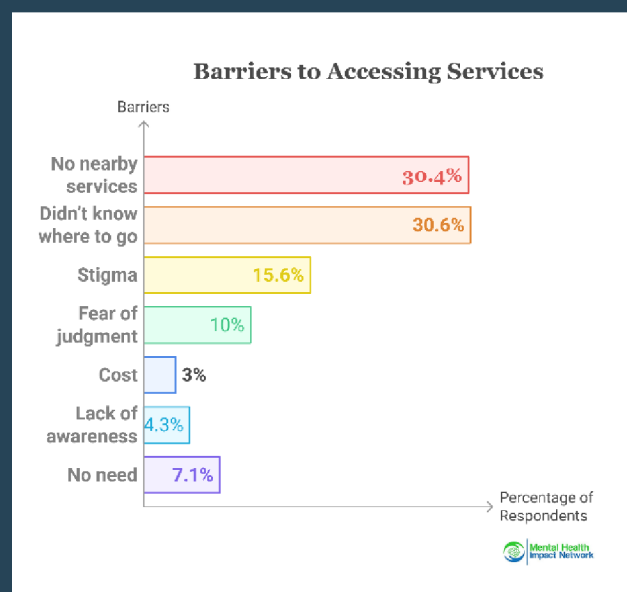
Have You Ever Sought Help?   *If yes, where did they go*

Mental Health Support Seeking Behavior

90.9%

100%

9.1%

0%

No   **Yes**

Majority did not seek help   Minority sought mental health support

Mental Health Support Options Used

Support Type	Percentage
Faith Based / Spiritual Healing	33%
Psychiatric or Clinical Care	15%
Peer or Group Support	23.3%
Online Mental Health Services	0.5%
Locally Certified Therapist	0%
Traditional or Spiritual Healing	9.5%
NGO or Community-Based Programs	18.7%

6. BARRIERS TO ACCESS - TOP BARRIERS TO SEEKING SUPPORT

Barriers to Accessing Services

Barriers

No nearby services — **30.4%**
Didn't know where to go — **30.6%**
Stigma — **15.6%**
Fear of judgment — **10%**
Cost — **3%**
Lack of awareness — **4.3%**
No need — **7.1%**
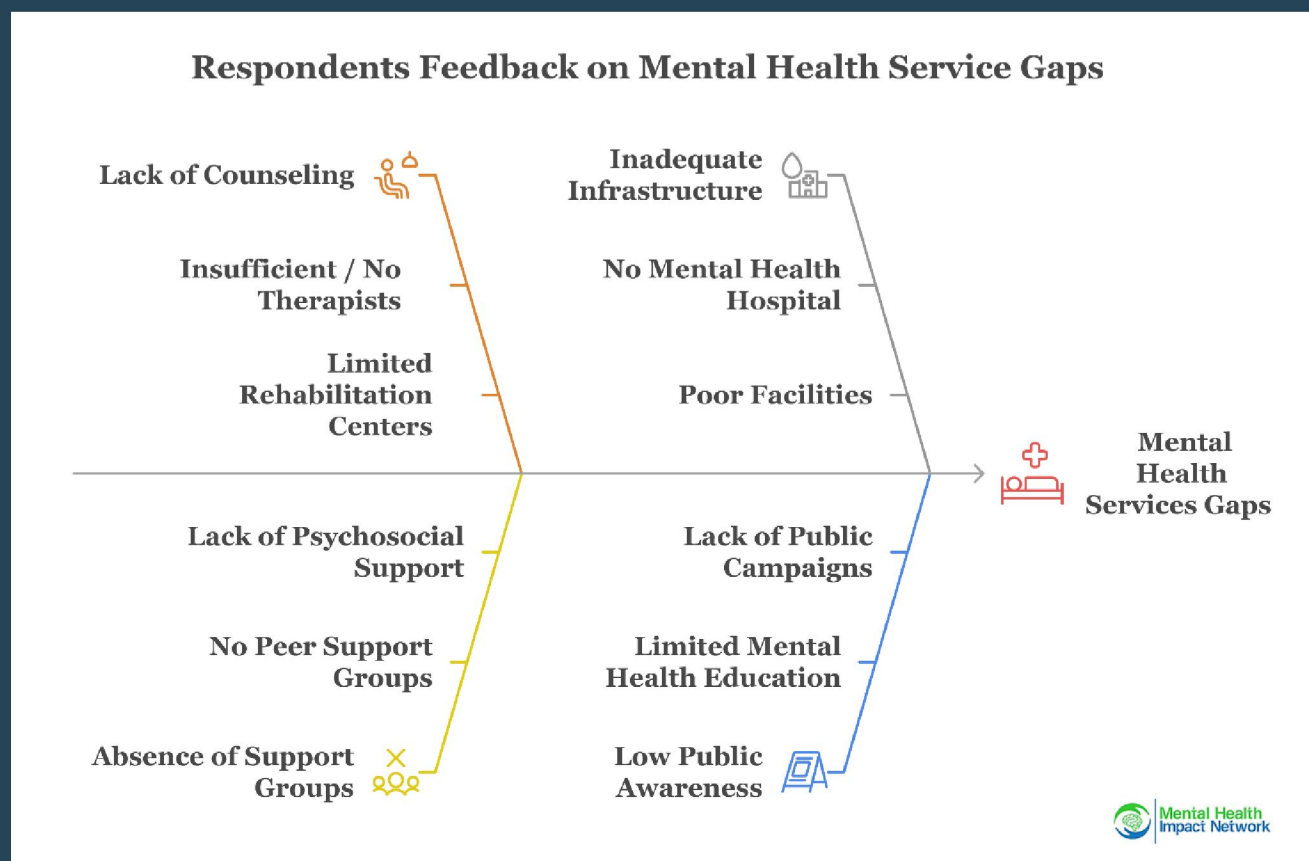
Percentage of Respondents

When asked why they hadn't sought help, participants cited lack of nearby services, not knowing where to go, and stigma.

Cultural attitudes and infrastructure gaps continue to prevent people from accessing support, even when the need is clear.

These Barriers Suggest both infrastructure and cultural gaps.

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7. THE MENTAL HEALTH SYSTEMIC GAP

"Participants highlighted several critical gaps in the mental health system, including the lack of trained therapists, inadequate access to counseling services, poor public awareness, and the absence of clear referral pathways. Many individuals were uncertain about what services, if any, were available to them."

Respondents Feedback on Mental Health Service Gaps

Lack of Counseling

Insufficient / No Therapists

Limited Rehabilitation Centers

Lack of Psychosocial Support

No Peer Support Groups

Absence of Support Groups

Inadequate Infrastructure

No Mental Health Hospital

Poor Facilities

Lack of Public Campaigns

Limited Mental Health Education

Low Public Awareness

Mental Health Services Gaps

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WHO SHOULD LEAD THE EFFORTS?

"When asked who should lead mental health change, every respondent agreed: it must be a collective effort. Participants called for a shared responsibility involving government, NGOs, schools, religious leaders, and families. No single sector can shoulder this burden alone."

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8. SOLUTIONS AND RECOMMENDATIONS

Participants emphasized the urgent need for structural, cultural, and emotional support systems around mental health.

Sierra Leone Comprehensive Mental Health and Substance Abuse Strategy

Youth Intervention
- Early Warning Systems
- Treatment Referrals
- Life-Skills Training

Engagement Loops
- Webinars
- Community Forums
- Participatory Research

Awareness Campaigns
- Schools
- Churches
- Media
- Community Outreach

Sierra Leone Strategic National Framework for Mental Health

Community Counselors
- Trauma-Informed Training
- Substance Use Screening
- Confidentiality Practices
- Referral Pathways

Support Spaces
- Drop-In Centers
- Peer Support Groups
- Psychosocial Support Groups

School Integration
- Mental Health Education
- Drug Prevention Education
- Remote Counseling

The most recurring suggestions included:

- Creation of Safe Spaces: Many called for physical and social environments where individuals can express themselves freely without fear of judgment or stigma.

- Policy Reforms: Respondents advocated for updated national policies that prioritize mental health, and increased funding for mental health related services.

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- National Conversations: Participants stressed the importance of sustained public dialogue to normalize mental health discussions and dismantle stigma, especially among youth.

- Accessible Therapy with Privacy and Trust: Trustworthy, confidential mental health services were repeatedly highlighted as essential for those hesitant to seek help.

- Increased Awareness Campaigns: There was a strong call for more education and outreach through schools, media, and community platforms to raise awareness and promote mental well-being.

Responses to Interventions that would help those affected by mental health issues reflected a strong desire for practical, community-based solutions. These included access to affordable or free counseling, peer support networks, trained community counselors, school-based mental health programs, and support tailored to survivors of trauma, drug and substance abuse.

9. CONCLUSION

In conclusion, despite the modest sample size, the data shows:

- Mental health challenges are common, especially financial stress, anxiety, and burnout.
- Very few people seek professional help, due to lack of awareness, services, or social stigma.
- Respondents want free counseling, safe spaces, education in schools, and national awareness campaigns.
- There is consensus that government, NGOs, schools, and families must act together to transform the mental health landscape.

Recommendations to address these gaps include launching nationwide mental health awareness campaigns, prioritizing youth-focused interventions such as skills development and training, and establishing safe support spaces alongside accessible therapy and counseling services, particularly for trauma recovery.

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10.   GLOSSARY OF KEY TERMS

Mental Health: A person's emotional, psychological, and social well-being. Mental health affects how people think, feel, act, handle stress, relate to others, and make decisions.

Well-being: A state of overall physical, mental, and emotional health, including life satisfaction and a sense of purpose.

Counseling Services: Professional guidance and support provided by trained therapists or counselors to help individuals manage emotional, psychological, or behavioral challenges.

Therapy: A structured process involving dialogue with a licensed mental health professional, aimed at improving mental well-being, treating disorders, or coping with trauma.

Safe Spaces: Physical or virtual environments where individuals feel secure to express themselves, seek support, and access services without fear of stigma, discrimination, or harm.

Referral Pathways: Formal or informal systems for directing individuals to appropriate health or psychosocial services (e.g., from a community leader to a mental health facility).

Stigma: Negative beliefs or attitudes about mental health that lead to shame, silence, discrimination, or exclusion.

Awareness Campaigns: Organized efforts (often public-facing) to educate communities about mental health, reduce stigma, and promote help-seeking behavior.

Trauma Support: Specialized services that help individuals recover from distressing or life-altering experiences, such as violence, loss, or displacement.

Psychosocial Support: A holistic approach to care that combines psychological and social support to promote resilience, healing, and community well-being.

Youth-Focused Interventions: Programs or policies targeting young people (especially ages 15–34), supporting them with life skills, mental health resources, and career readiness.

Skills Gap Training: Educational or vocational programs that build capacity in areas where young people or workers lack the competencies demanded by the job market.

Peer Support: Emotional and practical help provided by individuals with lived experience of mental health challenges to others going through similar issues.

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Help-Seeking Behavior: The process of recognizing a need for support and actively looking for assistance from formal (clinics, counselors) or informal (family, spiritual leaders) sources.

Self-Rated Mental Health: An individual's personal assessment of their mental or emotional well-being, often reported in surveys as "good," "fair," or "poor."

Collective Effort: A shared responsibility across sectors; such as government, NGOs, religious institutions, schools, and families, to promote and support mental health.

Mental Health Infrastructure: The system of trained professionals, facilities, services, policies, and laws that support mental health care within a society.

Emotional Resilience: The ability to recover from stress, trauma, or adversity and maintain psychological balance in challenging situations.

Mental Health Literacy: The knowledge and beliefs about mental disorders that help with recognition, management, or prevention.

THE END