

YOUTH COUNSELING CAMPAIGN REPORT.



EXECUTIVE SUMMARY

On May 18, 2025, Global Family Succour (GFS) organized a Youth Mental Health Counseling Campaign at Gihogwe Secondary School in Kigali's Gasabo District. The event aimed to address pressing mental health challenges among adolescents. Through structured group discussions and counseling sessions, students identified key issues affecting their well-being and proposed actionable solutions. This report outlines Mental health among students in Rwanda, the campaign's objectives, findings, and recommendations, aligning with national efforts to enhance youth mental health services.

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I. BACKGROUND AND INTRODUCTION

Global Family Succour Organization (GFS) is a Christian, non-profit organization dedicated to supporting and empowering families and youth. Our Vision is to Leading global transformation by empowering families to overcome challenges and

Unlock their potential. And the mission is to uplifting families through holistic care, empowering them to overcome challenges and thrive.

These three key pillars help us move forward by empowering individuals and fostering strong, resilient communities.

1. **Family Empowerment, Counseling, and Restoration:** This pillar offers counseling services like premarital, family, and youth therapy, helping families heal, restore emotional well-being, and strengthen unity, especially in times of crisis.
2. **Youth Empowerment, Education, and Skill Development:** Aimed at rural and urban youth, it provides education, mentorship, and skills training to overcome barriers to success, fostering self-sufficiency and leadership.
3. **Community Development and Strengthening:** This pillar promotes collaboration in community development, encouraging social responsibility and sustainable growth, ensuring that families and youth contribute to thriving, resilient communities.

II. IMPACT OF MENTAL HEALTH ISSUES AMONG STUDENTS IN RWANDA

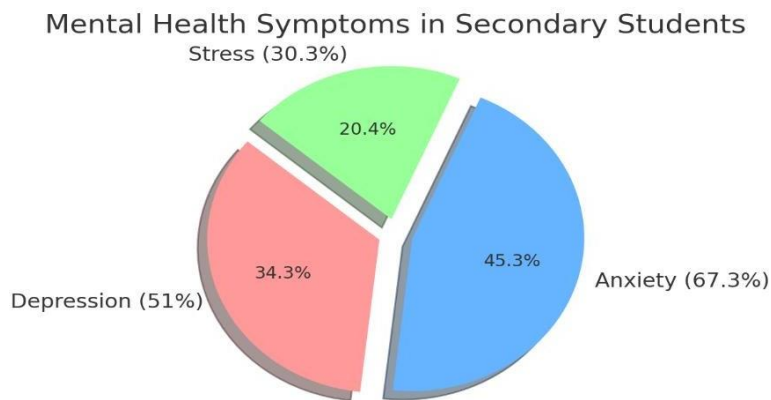
1. Introduction

Mental health challenges among students in Rwanda have become a growing concern, particularly across primary, secondary, and university levels. Despite the increasing evidence of these issues, school-based counseling services remain limited or non-existent in many schools.

2. Prevalence of Mental Health Symptoms in Secondary School Students

The pie chart presents the prevalence of mental health symptoms reported among Rwandan secondary school students, based on a 2024 study by Mukantwali et al. It indicates that:

- a) 67.3% of students suffered from anxiety,
- b) 51% exhibited clinically significant symptoms of depression, and
- c) 30.3% experienced stress, especially during the COVID-19 pandemic

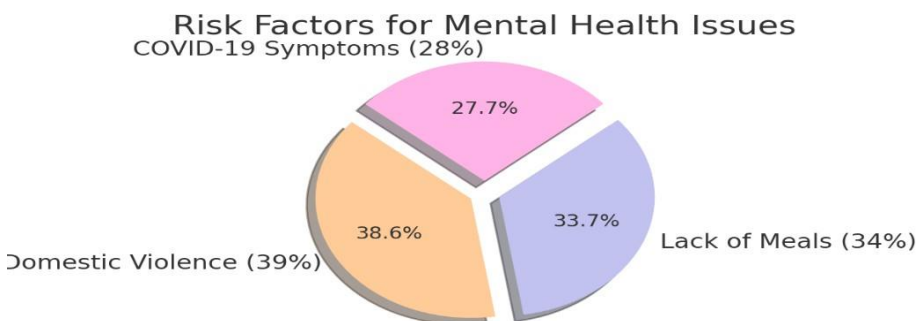


These figures reveal that a significant proportion of students are coping with multiple overlapping psychological challenges. The high levels of anxiety and depression, in particular, suggest systemic emotional strain and highlight the urgent need for school-based psychological interventions.

3. Risk Factors Contributing to Mental Health Challenges

This pie chart identifies the most common risk factors associated with mental health challenges in secondary schools:

- a) 39% of students had been exposed to domestic violence,
- b) 34% suffered from lack of regular meals,
- c) 28% experienced COVID-19 symptoms, and
- d) Female students showed a disproportionately higher likelihood of experiencing anxiety and depression.

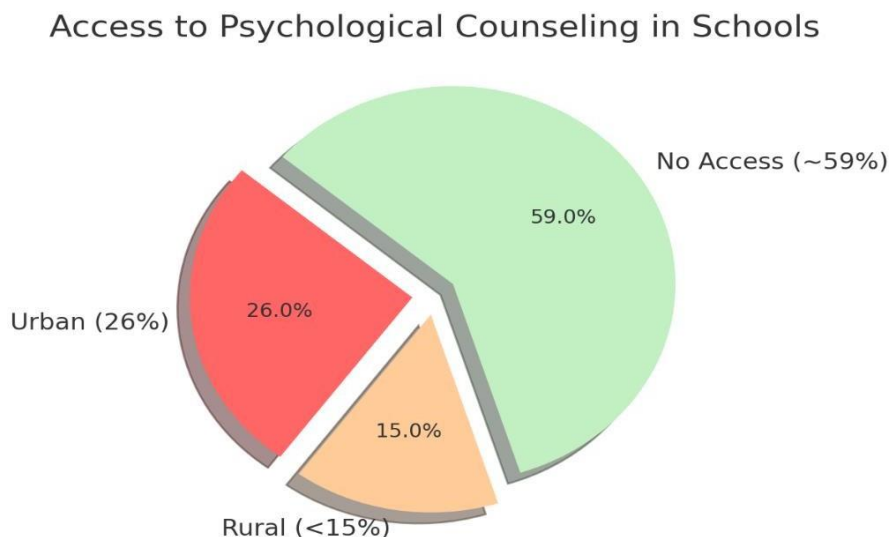


These statistics underscore how psychosocial and gender-based vulnerabilities contribute significantly to the mental health crisis. Factors such as domestic violence and food insecurity exacerbate emotional instability, while girls are especially susceptible to mental health disturbances due to social expectations and gender-based violence.

4. Access to Psychological Counseling in Schools

The fourth pie chart reflects the availability of trained psychological counselors in Rwandan schools:

- a) Only 26% of urban schools have staff trained in psychological counseling,
- b) Less than 15% of rural schools offer such services,
- c) More than 80% of primary schools have no dedicated mental health professionals (REB, 2023).



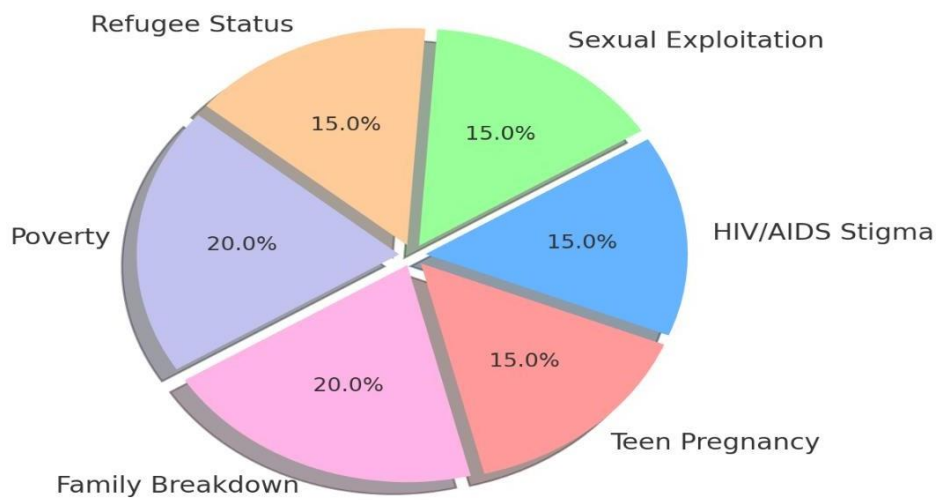
This lack of trained professionals has left many teachers who often lack psychosocial training responsible for addressing mental health concerns among students. The absence of structured school counseling programs leaves many children's psychological issues untreated, thereby contributing to behavioral problems, academic underperformance, and increased dropout rates.

5. Socio-Environmental Causes of Mental Health Issues in Adolescents

The final pie chart elaborates on broader socio-environmental factors that contribute to mental health challenges among adolescents, based on the UNICEF Rwanda (2024) report. It estimates that approximately 10% of Rwandan adolescents are affected by mental health conditions stemming from:

- a) Refugee status, 15%
- b) Family breakdown, 20%
- c) Teen pregnancy, 15%
- d) HIV/AIDS stigma, 15%
- e) Sexual exploitation, 15% and
- f) Poverty, 20

Causes of Mental Health Issues (UNICEF 2024)



These challenges affect both mental health and educational outcomes, often resulting in delayed graduation, poor school attendance, and increased vulnerability to abuse and neglect. The intersection of these socio-economic problems with inadequate mental health care infrastructure exacerbates the crisis.

6. Conclusion

The pie charts discussed above offer a compelling visual and statistical representation of the mental health crisis affecting Rwandan students. The data highlights urgent areas of concern, including high levels of anxiety and depression, significant social risk factors, and an alarming lack of school-based mental health services. Addressing these challenges will require increased government and stakeholder investment in school counseling services, teacher training, and inclusive mental health policies.

III. RESULTS AND DISCUSSIONS ON MENTAL HEALTH CHALLENGES FACED BY THE YOUTH.

This report presents the outcomes of group discussions held by students at Gihogwe Secondary School (GSS). The discussions focused on identifying issues affecting their mental health and exploring viable solutions. Youth counseling campaign was designed to provide a platform for young people to voice their thoughts, share personal challenges, and collectively seek practical solutions aimed at promoting sound mental health. 135 Students from Senior 1 to Senior 4 were divided into nine groups, each consisting of 15 students, who engaged in dialogue about the issues they face and strategies to overcome them.



1. GOALS AND OBJECTIVES

This youth counseling initiative aimed to assist students in identifying and addressing emotional and relational challenges related to family, school, peers, and mental well-being.

A) GOAL

The campaign aimed to promote mental well-being, reduce teenage pregnancies, and prevent school dropouts among Rwandan students by offering school-based counseling, awareness, and psychosocial support services. It empowered students to make informed decisions about their health, relationships, and education, leading to improved academic performance, increased discipline, and better emotional well-being and to strengthen the resilience of youth and families through Christian-based counseling grounded in compassion and hope.



B) OBJECTIVES

This school-based campaign addressing mental health, teenage pregnancy prevention, and psychosocial support is designed to reduce dropout rates by providing early counseling, reintegration support for pregnant teens, and strengthening family involvement.

To improve academic performance by addressing emotional challenges such as anxiety and trauma that hinder learning, while also fostering a supportive environment through peer clubs and trained teachers. Behavioral issues in the classroom are tackled through life skills training, conflict resolution, and early intervention, helping students manage emotions and build positive relationships. Altogether, the campaign promotes a healthier, safer, and more inclusive school environment that supports students' well-being and academic success.

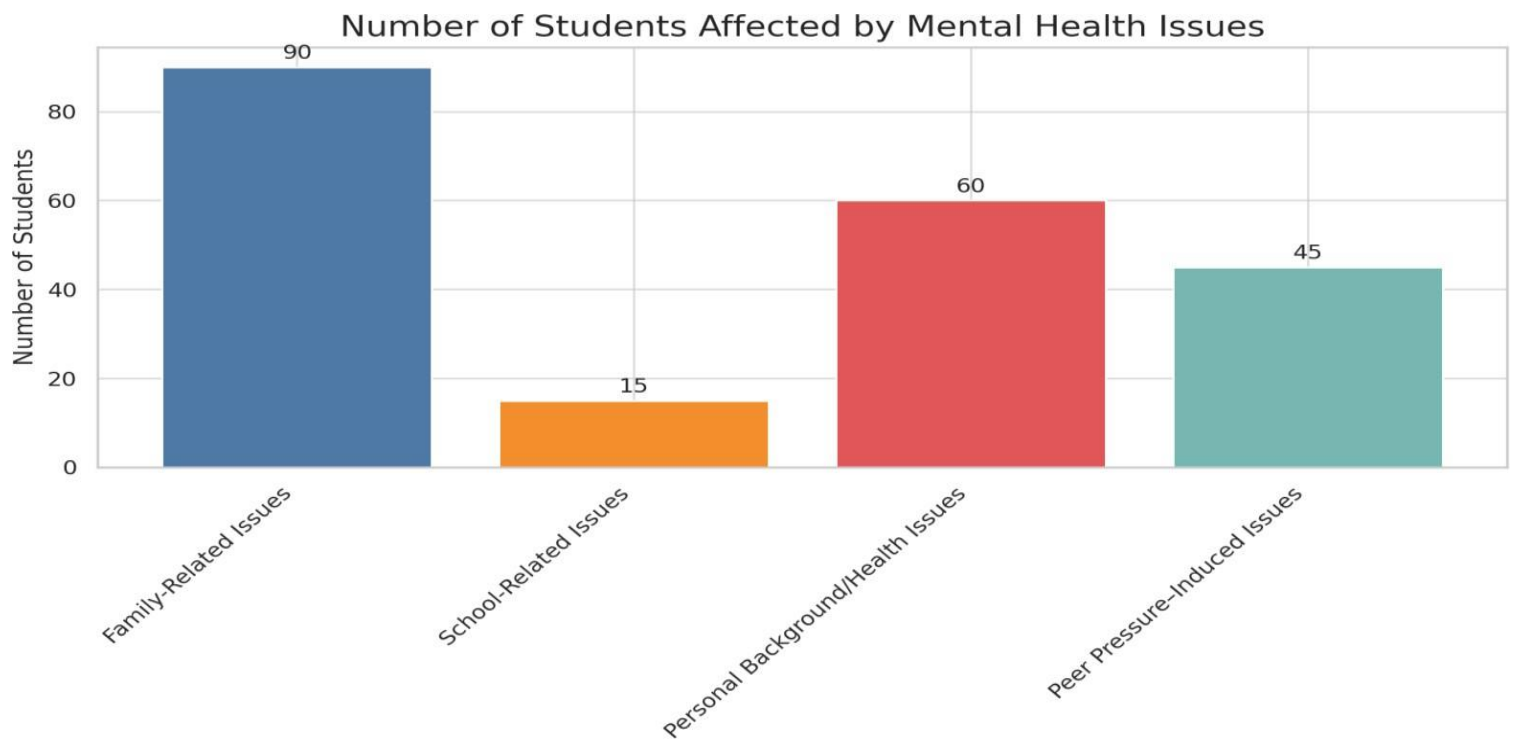


2. METHODOLOGY

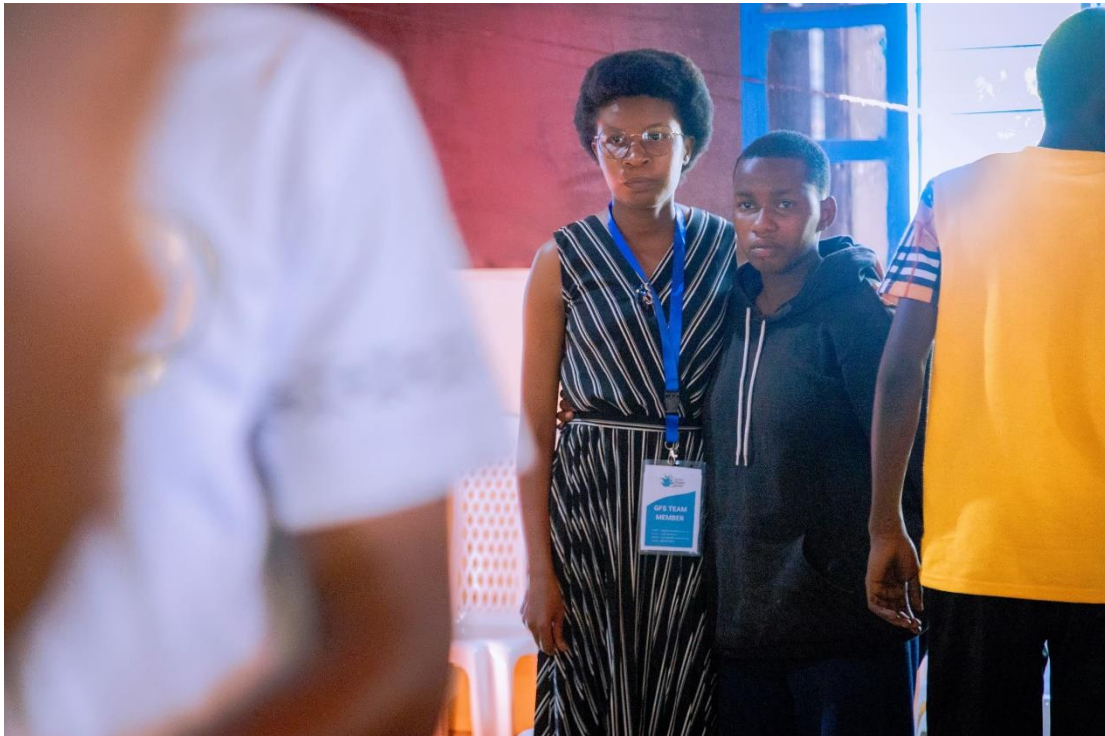
Participants were divided into nine groups, each comprising approximately 15 students from Senior 1 to Senior 4. Facilitated discussions focused on personal experiences related to mental health. Data collected from these sessions were analyzed to identify common themes and inform recommendation.



3. RESULTS



3.1. Family-Related Issues (Groups 1, 2, 4, 5, 6, 7) that hurt emotional of Youth



- a) Loss of parents or being orphaned
- b) Family conflicts
- c) Favoritism and discrimination among siblings
- d) Infidelity between parents
- e) Physical, sexual, and emotional abuse
- f) Alcoholism, drug abuse, and extreme poverty
- g) Lack of communication and emotional connection within the family
- h) Parental separation or divorce
- i) Being forced into choices without consent
- j) Neglect and lack of a voice in family matters
- k) Upbringing by parents with negative or harmful ideologies
- l) Different Religions or believes among parents

Many students face deep-rooted family challenges, including loss of parents, abuse, infidelity, discrimination, and a lack of emotional support. These issues often lead to neglect, limited autonomy, and emotional distress, greatly affecting their well-being and development.

3.2 School-Related Issues (Group 5)



- a) Lack of school fees and learning materials
- b) Bullying, mockery, and disrespect from peers
- c) Conflicts or misunderstandings with teachers
- d) Hunger and lack of meals at school

Students report facing serious challenges in the school environment, such as lack of basic learning materials, hunger, bullying, and strained teacher-student relationships, all of which hinder academic engagement and success.

3.3 Issues Stemming from Personal Background or Health (Groups 3, 6, 7, 9)



- a) Disabilities and chronic illnesses (e.g., HIV, cancer)
- b) Born with and Having chronic diseases at a young age like HIV
- c) Losing close relatives or siblings
- d) Taking care of children without guardians
- e) Denial of the right to worship or abstain
- f) Lack of freedom to express oneself or make personal choices
- g) Loans

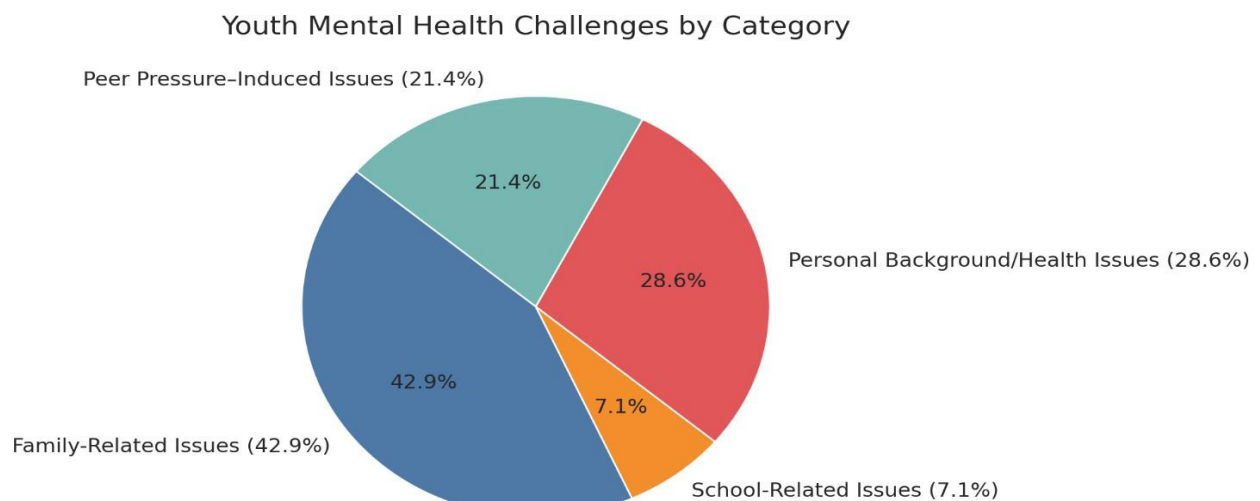
Personal struggles, including chronic illness, disability, grief, and lack of personal freedom, significantly impact students' mental and emotional health, often leaving them with heavy responsibilities and limited support.

3.4 Peer Pressure–Induced Issues (Groups 3, 8, 9)



- m) Being lured into negative behaviors (drug use, sexual immorality, smoking)
- n) Harassment and bullying
- o) Humiliation or ridicule
- p) Losing money to gambling or betting

Peer pressure has led to harmful outcomes for some students, including substance abuse, bullying, social humiliation, and financial losses through gambling—contributing to a cycle of risky behavior and emotional instability.



III. JUSTIFICATION OF YOUTH COUNSELING CAMPAIGN AND RECOMMENDATIONS

1.JUSTIFICATION

Rwanda faces increasing challenges with youth, particularly the rising rates of mental health issues and school dropouts. These problems are often linked to family violence, poverty, and insufficient mental health education. The need for comprehensive, youth-centered support is urgent.

Rwanda's Vision 2050, launched in December 2020, aims to position Rwanda as an upper- middle-income country by 2035 and a high-income nation by 2050. This vision emphasizes key sectors such as health, education, youth, and family welfare, fostering sustainable development and inclusive growth. The National Strategy for Transformation 2 (NST2: 2024–2029), approved in August 2024, serves as the medium-term framework for achieving the goals of Vision 2050.

Both Vision 2050 and NST2 stress the importance of holistic development.

2.RECOMMENDATIONS FROM PARTICIPANTS.



Students expressed the following needs:

1. Establish school-based counseling programs
2. A consistent and accessible mental health support system
3. Capacity building for teachers, parents, and students in effective communication, Emotional and trauma management.
4. Enhanced youth education on Mental health, along with platforms for peer group discussions on personal and shared issues
5. Form peer support groups among students
6. Train teachers on how to address students' emotional and psychological well-being
7. Promote open communication between parents and children.

We respectfully propose establishing a partnership between Global Family Succour (GFS) and Gihogwe Secondary School (GSS) to collaboratively implement school-based mental health and reproductive health counseling programs. This collaboration could involve working closely with existing student clubs focused on health and well-being, thereby fostering peer-led support systems and enhancing the overall effectiveness of the initiative.

This recommendation aligns with the students' expressed needs for accessible mental health support and peer group discussions. It also emphasizes collaboration with existing structures within the school, promoting sustainability and community ownership of the program.

VI. CONCLUSION

Group discussions revealed a high prevalence of emotional and psychological distress among the youth, primarily rooted in family, school, and general life challenges. Addressing these issues calls for the concerted efforts of all stakeholders teachers, school administrators, parents, counselors, and community organizations to implement sustainable systems for listening, training, and supporting young people as they heal and build a better future.

VII. PROBLEMS MENTIONED IN THE GROUP THAT AFFECT YOUTH EMOTIONS

GROUP 1: ISSUES WE FACE THAT AFFECT OUR EMOTIONS



1. Losing parents
2. Conflicts in families
3. Poverty in families
4. Child abuse
5. Living without protection
6. Being neglected while growing up
7. Not getting what we desire or need
8. Betrayal
9. Living with a disability
10. Being raised by parents with a negative mindset
11. Being forced or pressured
12. Discrimination
13. Not being given a voice
14. Being abandoned
15. Depression or hopelessness
16. Injustice

GROUP 2: SOME CAUSES OF FAMILY DYSFUNCTION



1. Poverty & Financial Instability.
2. Jealousy
3. Alcohol abuse
4. Lack of understanding in the family
5. Infidelity
6. Discontentment
7. Untreated Mental Health Issues.
8. Untreated Addiction & Substance Use.
9. Violence & Abuse.

GROUP 3: CAUSES OF CONFLICTS IN FAMILIES



1. Discontentment
2. Peer pressure: having bad friends who influence behaviors like smoking, fighting, etc.
3. Disability
4. Poor families: for instance, when some children bring good things to school and others can't afford them, it affects the emotional well-being of poor children
5. Religious beliefs
6. Masturbation

GROUP 4: THINGS THAT CAUSE FAMILY PROBLEMS



1. Infidelity
2. Property disputes
3. Drug abuse
4. Infertility
5. Lack of trust
6. Religious differences
7. Disputes over children's gender (e.g., father wants a boy, mother gives birth to a girl)
8. Poverty
9. Lack of freedom in decision-making
10. Unfulfilled desires

GROUP 5: FAMILY ISSUES THAT AFFECT YOUTH EMOTIONS



1. Poverty
2. Excessive alcoholism
3. Family conflicts
4. Heavy labor
5. Abuse (e.g., unwanted pregnancies)
6. Inequality in the family
7. Favoring children of one gender
8. Killings within families
9. Losing family members
10. Lack of communication with parents
11. Feeling unfree at home
12. Parents separating
13. Lack of food
14. Drug abuse
15. Illness of parents

School-Related Issues That Affect Youth Emotions:

1. Lack of school fees
2. Peer pressure
3. Being shamed by fellow students
4. Hunger
5. Mistreatment by school leaders
6. Hatred towards teachers
7. Being disrespected by others
8. Lack of school materials

GROUP 6: PROBLEMS THAT AFFECT YOUTHS FEELINGS



Q1: Conflicts between parents

Q2: Persecution (e.g., harsh words, hard labor)

Q3: Abuse (e.g., neglect)

Q4: Historical traumas

Q5: Livelihood challenges

GROUP 7: THINGS THAT HARM THE EMOTIONS OF YOUTH



1. Losing parents (or family)
2. Hunger (due to place of birth or upbringing)
3. Contracting HIV as a child
4. Poverty in the family
5. Gender-based violence
6. Isolation from others
7. Being born with a disability
8. Denial of rights
9. Discrimination based on identity
10. Lack of siblings
11. Being rejected by the family due to personal issues
12. Being denied freedom to worship as desired

GROUP 8: CAUSES OF BAD BEHAVIOR IN YOUTH



1. Persecution
2. Family conflicts
3. Abuse
4. Losing parents
5. Discrimination
6. Extreme poverty
7. Peer pressure
8. Chronic illnesses
9. Being born with a disability

GROUP 9: PROBLEMS AFFECTING YOUTHS EMOTIONAL WELL-BEING & MENTAL HEALTH



1. **Family issues:** frequent family conflicts; parents using drugs or alcohol
2. **Peer pressure:** influence to drink alcohol, smoke, or engage in sexual activity
3. **Unwanted pregnancies:** many girls get pregnant while still in school
4. High number of orphans
5. Drug abuse
6. Dropping out of school
7. Depression
8. Harassment: when someone is constantly harassed, it can lead to suicide
9. Loan/debt issues
10. Masturbation
11. Diseases: including HIV and cancer in children
12. Prejudice: discrimination based on identity or disability
13. Disability: being deaf or disabled can lead to rejection
14. Gambling: losing money through betting
15. Poverty: lack of housing and food

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