

LEARNING SESSION REPORT

Mental Health & Emotional Wellbeing

HRDN Wellbeing Initiative: taking the conversation to the community



DATE
20 July 2026

VENUE
ICT Field Unit, NRSP,
Tarlie

RESOURCE PERSON
Dr. Naima Hassan

PARTICIPANTS
25 women &
community activists

AT A GLANCE

25

women and community
activists took part

4

working groups

2

guided drawing exercises

5

coping practices explored

Session	Mental Health & Emotional Well-being of Women: building awareness, self-care and positive coping
Date and venue	20 July 2026, ICT Field Unit, NRSP, Tarlie
Organizer	Human Resource Development Network (HRDN), with the support of NRSP
Initiative	HRDN Wellbeing Initiative, extended to the community level
Resource person	Dr. Naima Hassan, psychologist (voluntary service)
Participants	25 women and community activists from diverse backgrounds
Language and format	Urdu; interactive, in four groups, using discussion, drawing and plenary reflection

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Executive summary

On 20 July 2026, the Human Resource Development Network (HRDN) held a one-day learning session on the Mental Health and Emotional Well-being of Women for 25 women and community activists at the ICT Field Unit, NRSP, Tarlie. The session extended the HRDN Wellbeing Initiative from the organization to the community level, and was facilitated, as a voluntary service, by psychologist Dr. Naima Hassan.

The session moved in a deliberate sequence. After a recitation from the Holy Quran and a welcome from HRDN's CEO, Dr. Hassan opened with a simple question, how do you express your emotions?, and guided the women through two drawing exercises. The first, five circles of life, let each woman see and name the emotions that fill her life. The second, a tree, asked her to see herself and her roles as roots, trunk, branches, leaves and fruit. Between the two, Dr. Hassan drew out the central message that women who care for everyone else must also care for themselves, and set out low-cost coping practices: self-talk, sharing with a trusted listener, drawing, poetry, and kitchen gardening and plantation.

HEADLINE MESSAGES

Name your feelings, because hatred, anger, sadness, joy and love all shape the body, the mind and the way we treat our families. Look after yourself, because no one else can do it for you, and doing so is not a sign of weakness. Do not bottle things up: talk to yourself, find the root cause, and share with someone trustworthy who will simply listen. Release anger constructively through drawing, poetry, gardening and positive activity.

Participants responded warmly. They laughed, shared and vented, and said they left feeling relaxed, better able to control emotions, and clearer about using their time productively rather than expressing anger destructively.

Read analytically, the session did three things at once. It gave women a shared vocabulary for feelings (naming), it offered non-verbal and restorative channels for them (drawing, poetry, soil), and it modelled peer listening as a form of community care. Section 6 links each of these to published research and sets out the limits of what one session can show. The report closes with proposed next steps to turn a single session into a continuing, community-led wellbeing practice.

A. Context

1. Background and rationale

Mental health and emotional well-being are essential to a person's overall health, quality of life and ability to manage everyday challenges. HRDN believes they are the foundation of stronger women, stronger families and stronger communities. The World Health Organization describes mental health as "a state of mental well-being that enables people to cope with the stresses of life", and notes that community-based care is more accessible and acceptable than institutional care.

For women, emotional well-being matters in a particular way. Women often navigate multiple responsibilities within families, workplaces and communities, while their own emotional needs receive limited attention. Family pressures, social expectations, financial concerns and caregiving can build into stress, emotional exhaustion and difficulty managing emotions. The need is documented in Pakistan: a community survey of 1,218 women aged 18 to 50 in a Karachi neighborhood classified about 30 percent as anxious and depressed, with lack of education and verbal abuse among the significant risk factors. At the same time, a peer-delivered programme in rural Rawalpindi trained village women with no prior health-care experience to deliver psychosocial support, and 31 of 45 volunteers stayed on for five years with satisfactory competency.

Together these point to a strategy. Promoting mental health needs safe spaces where women can understand their emotions, express them without fear of judgement and build practical coping mechanisms, and trusted women from the community are well placed to carry this work to others. This is why the session was held for women and community activists: they are the links through whom wellbeing practices can reach many more women and families.

2. Objectives:

The session aimed to help participants:

1. explore, name and understand their emotions and how they are expressed;
2. recognize how emotions affect physical health, emotional health and family life;
3. understand why caring for oneself is as important as caring for others;
4. learn practical, low-cost ways to release anger and tension, including creative expression, gardening and plantation;
5. rediscover their inner strengths and roles, building confidence and resilience; and
6. see the value of peer support, and the role community activists can play in promoting mental-health awareness.

3. Approach and methodology:

The session used a participatory, creative approach rather than a lecture. It opened with a recitation from the Holy Quran, which set a reflective tone, and participants were then divided into four groups. Each woman received an A4 sheet and a box of crayons. Drawing gave women a way into feelings that are hard to put into words, and conducting the discussion in Urdu, the participants' own language, kept the conversation open. Each activity followed the same pattern: a guided task, individual reflection, then plenary sharing led by the resource person.

Methodologically, the session combined three layers. An expressive layer (drawing and poetry) helped women externalise feelings; a restorative layer (kitchen gardening and plantation) offered contact with nature and a sense of productive engagement; and a relational layer (listening, sharing and peer support) reminded women that they are not alone. The facilitator also stressed seeking support when required.

4. Participants and resource person:

Participants. Twenty-five women and community activists took part, drawn from diverse backgrounds and experiences. The age profile was not recorded at the time of reporting, but the reflections show a wide range, from young girls to elderly women, and their different life stages shaped the discussion, especially in the tree exercise. Involving community-level actors is deliberate: they are the people through whom awareness and supportive conversations can spread.

Resource person. Dr. Naima Hassan is a psychologist who has offered her professional services in Pakistan and abroad, at the global level, while keeping close contact with communities on the ground. She worked in the earthquake-affected areas after the 2005 earthquake and in the period that followed, supporting people through crisis and recovery. She gave her time to HRDN voluntarily.



B. Proceedings:

The session is reported below in the order in which it unfolded. Each step builds on the one before: from welcome, to naming emotions, to caring for oneself, to coping, to seeing oneself as part of a family tree, and finally to shared reflection and thanks.

Step	Activity	Purpose
1	Recitation, welcome and acknowledgement	Set a reflective tone and the purpose of the Wellbeing Initiative
2	Opening conversation: how do we express our emotions?	Surface how women currently handle feelings
3	Exercise 1: five circles of my life	Make emotions visible, personal and nameable
4	Plenary: labelling the circles and caring for yourself	Link emotions to health and family; introduce self-care
5	Coping: what to do when something disturbs you	Give practical tools: self-talk, listening, drawing, poetry, gardening
6	Exercise 2: my tree	Connect roles, identity and strength
7	Participants' reflections	Let women voice what they saw in themselves
8	Vote of thanks, exhibition and group photograph	Close, showcase women's skills and carry the message home

Step 1. Recitation, welcome and introduction:

Welcome by the CEO. The session began with the recitation of the Holy Quran by one of the participants. Ms. Robeela Bangash, CEO of HRDN, then welcomed the participants and introduced Dr. Naima Hassan, appreciating her voluntary services and her work in the earthquake-hit areas in 2005 and 2006 while keeping close ties with communities.

In her opening remarks, Ms. Bangash linked the session to the purpose of the Wellbeing Initiative:

- Women often manage many responsibilities in homes, families, workplaces and communities, and while they put others first, their own emotional health can be overlooked.
- Emotional well-being is linked to the quality of family relationships and the wider social environment: women who understand and manage their emotions cope better, communicate better and contribute more to their families and communities.
- Women need a space where they feel heard and understood and can raise concerns without fear of judgement. She asked participants to engage actively, share where comfortable, and approach the learning with openness and mutual respect.

Acknowledgement. Ms. Shaisat was acknowledged for her continued support, presence and facilitation in coordinating with HRDN, and the NRSP team for connecting HRDN with the participating women and community activists. Ms. Bangash noted that trusted local links like these are what make sensitive conversations, such as those on mental health, possible, because women take part more willingly when the invitation comes through someone they know and trust.



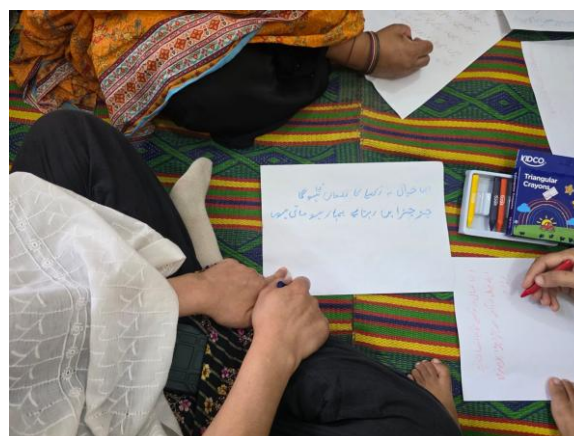
Step 2. Opening conversation: how do we express our emotions?

Dr. Hassan began by asking the participants how they express their emotions. The question was deliberately open. It did not ask what is wrong with you; it asked what do you do, which treats emotion as a normal part of life rather than a problem to be confessed. It invited women to describe what they actually do when they are happy, angry or sad, and set up the exercise that followed.

Step 3. Exercise 1: five circles of my life

What was done. Each participant drew one big circle on her sheet and four more inside it, each smaller than the last, and wrote her name on the page. She then chose her favourite colour and labelled each circle with what that emotion means in her own life. Pink was the most popular colour.

Why it works. The circles turn an abstract idea into something each woman can see and own. Drawing externalises a feeling: once it is on paper it can be looked at, named and discussed, rather than simply endured. Every colour tells a story and every emotion deserves to be heard.



Step 4. Plenary: labelling the circles and caring for yourself:

Dr. Hassan gathered the group's points and labelled the five circles on the flipchart, discussing how much space each emotion takes up in our lives:

Circle	What it represents
Hatred	The negative, resentful feelings we carry
Joy and happiness	Moments of contentment and cheer
Sadness	Grief, hurt and low moods
Love and care	Affection for, and care of, those we love
Anger and repentance	Flaring up, and regretting it afterwards

She explained that these emotions, hatred and love in particular, are expressed through the body and mind and affect physical and emotional health, and that how a woman handles them then shapes how she reacts to the people around her in the family.

Then came the central message of the session. Sensitive people take care of everyone they love, whether parents, husband, children or friends, but they forget themselves. Dr. Hassan put a question to the group: if I do not take care of myself, what will be the drawbacks and repercussions? The question reframes self-care from a selfish act into a condition for continuing to care for others.

KEY LEARNING

To keep supporting others, a woman must first care for herself, and only she can do it. No one else will take care of you when you are angry, disturbed or upset.

She added that a person must also keep herself clean, in body and mind, which is a requirement of our religion as well. Grounding self-care in a shared faith and cultural value made the message familiar rather than imported.

Step 5. Coping: what to do when something disturbs you:

Dr. Hassan then turned the discussion to practical tools. She stressed that when a thought is disturbing you:

1. **Talk to yourself.** Send yourself a message and ask why it is disturbing you, then dig out the root cause.
2. **Share with a trusted listener.** Tell someone trustworthy and reliable who will simply listen. Venting what you have bottled up inside is healthy, and being heard without judgement lets a woman see that she is not alone.
3. **Release it creatively.** Draw, write poetry, or do something that lets the anger go. Creative expression gives words and shapes to feelings that are difficult to say aloud.
4. **Go to the soil.** Plantation and kitchen gardening can be done even in broken pots. Working with soil is soothing, brings you close to nature and gives a quiet, productive moment amid daily responsibilities.

One participant shared that when she is very angry she talks to herself, and the tension goes out. Asked how to tackle strong emotions such as anger, participants themselves offered solutions: take

up kitchen gardening, engage in constructive and positive activities that keep you busy and release “happy hormones”, and, as some mentioned, take tablets or medicine for tension and depression.

Note: medicine for anxiety or depression should only be taken on the advice of a doctor or qualified professional. Persistent distress is a reason to seek support, which the session also encouraged.

These suggestions are consistent with research. In a Drexel University study of 39 adults, 45 minutes of free art-making lowered the stress hormone cortisol in 75 percent of participants, whatever their skill. A meta-analysis of 22 gardening studies found benefits for depression, anxiety and stress, and the Utah State University Extension notes similar gains. Section 6 returns to this evidence.

Step 6. Exercise 2: my tree:

What was done. Participants drew a tree and asked themselves which part they felt they were: roots, trunk, branches, leaves, flowers or fruit. Dr. Hassan explained that a tree starts with the root, then the trunk, branches, leaves, flowers and fruit, and asked each woman to relate it to herself in her different roles, as daughter, mother, wife, sister and friend, talking to herself as she drew.

What she drew out. As they draw and think, she said, women will realise how much nature has given them attributes and value. Bad thoughts come at different stages of life; the tree reminds a woman of her worth. Her advice to add colour to the drawing was also a call to add colour to life.

Reading the exercise. The tree works as a metaphor for interdependence. Roots are the least visible part and carry the whole tree; fruit is the most visible and is enjoyed by others. Placing herself on the tree lets a woman see which of her contributions are seen and which go unseen, and that every part, including the young leaves and the unseen roots, has value.

KEY LEARNING

Every woman plays a unique role, as the roots, the trunk or the branches of her family, and she holds several roles across her life.



Step 7. Participants' reflections:

Women answered differently, reflecting their ages and roles. The following is recorded in paraphrase, without names:

An elderly participant said she is like the roots, giving strength to the whole family.

"I am the trunk. The roots are my family, my parents and my brothers." Dr. Hassan replied that she was happy to hear it, as the trunk is the strongest part of the tree.

"I chose green because it is soothing, and trees are green. I am the whole tree myself, in my different roles across my life."

"My mother-in-law is the roots." The hall filled with laughter; she explained that her mother-in-law keeps the combined family living together.

"I am the trunk. If I am strong, I will contribute to a strong family as the outcome."

A young woman said she is the roots, because roots are the real strength: if they are strong they nourish the whole tree and make the trunk strong. The branches, she said, are her children. She likes red, and Dr. Hassan encouraged her to add colour to life.

Young girls said they are the leaves and flowers.



Step 8. Vote of thanks, exhibition and group photograph

At the close, Ms. Bangash thanked Dr. Naima Hassan for dedicating her time and expertise, the NRSP team for connecting HRDN with the women and community activists, Ms. Shaista for her continued support, and all 25 participants for their time and willingness to engage. She urged them to carry the learning into daily life, saying that caring for one's emotional well-being is not a sign of weakness but part of maintaining personal health, building healthy relationships and contributing to a supportive family. She encouraged participants to practise empathy, listen without judgement and support women who may be struggling, and noted that meaningful change often begins with small actions: making time for self-care, expressing feelings constructively, engaging in positive activities and

offering understanding to those around us. Participants also exhibited the skilled work and products they had brought with them, and a group photograph was taken to mark the occasion.



Group Photograph

C. Results and analysis:

5. Key learning and practical takeaways:

Message from the session	Practical takeaway for a woman activist
Emotions affect body, mind and family	Notice what you feel and how you react at home
Care for yourself first, so you can keep caring for others	Set aside time for your own well-being; stay clean in body and mind; self-care is not weakness
Do not bottle things up	Talk to yourself, find the root cause, then share with a trusted listener
Anger can be released constructively	Draw, write poetry, garden (even in broken pots) or take up a positive activity
Every role has value	See yourself as the roots, trunk, branches or leaves of your family and add colour to life
Peers are a protective resource	Listen without judgement and support women who are struggling; refer to professionals when needed

6. Analytical reflection: why the session worked:

Note: this section is the report author's interpretation, linking what happened in the room to published research. It is not a record of what was said, and the research cited describes general effects, not an evaluation of this session.

From private burden to shared language. The circles asked women to label, not suppress. Laboratory research shows that putting feelings into words reduces activity in the brain's emotional-alarm centre, the amygdala (Lieberman et al., 2007). The group's five labels (hatred, joy and happiness, sadness, love and care, anger and repentance) also gave participants a common vocabulary, which is the precondition for talking about feelings with family members.

Expression through form. Drawing and poetry let women say what is hard to say. A World Health Organization review found arts engagement associated with the prevention and management of ill-health and with mental well-being (Fancourt and Finn, 2019), and the Drexel study found a drop in cortisol after art-making regardless of skill (Kaimal et al., 2016). Non-verbal media also lower the cost of entry where open emotional disclosure can carry social risk.

Restoration through soil. A meta-analysis of 22 studies found gardening associated with lower depression, anxiety and stress and higher life satisfaction (Soga et al., 2017). The facilitator's point that gardening works even in broken pots matters for equity: the practice needs no land, money or equipment, so any household can try it.

Listening as protective infrastructure. The "trusted listener" is an application of the social-support buffering hypothesis, that perceived support protects people from the harmful effects of stress (Cohen and Wills, 1985). Because listening is a skill, not a profession, it can be taught to activists, as the Rawalpindi peer programme suggests, provided a referral route exists for those who need clinical care.

The caregiver's paradox. Women's identities are often organized around care for others, so self-care can feel like a betrayal. The session resolved this in three ways: it framed self-care as the condition for continued care, it grounded it in the shared value of cleanliness of body and mind, and, through the

tree, it showed that weak roots weaken the whole family. The closing message that self-care is not a sign of weakness completed the reframing.

The table below summarizes how each practice maps to a mechanism and to the evidence.

Practice in the session	Mechanism	Supporting evidence
Naming emotions (five circles)	Affect labelling dampens emotional reactivity	Lieberman et al., 2007
Drawing and poetry	Symbolic, non-verbal expression; stress reduction	Kaimal et al., 2016; Fancourt and Finn, 2019
Kitchen gardening and plantation	Restorative activity and contact with nature	Soga et al., 2017
Trusted listener and peer sharing	Social support buffers the effect of stress	Cohen and Wills, 1985; Rawalpindi peer programme
The tree	Roles and worth reframed through metaphor	Interpretive; no direct trial evidence

Three levels of change. The session worked at three levels at once:

- Individual: naming, regulating and releasing emotions.
- Family: understanding how unattended emotion shapes reactions at home.
- Community: activists as trusted listeners who normalise conversations about mental health.

Limits. This was a single session. Its effects were observed through participants' own reactions and self-reported feedback; there was no baseline or follow-up measure, so lasting change cannot be claimed. A creative or peer approach complements, and does not replace, professional care for persistent or severe distress.

7. Outcomes against the objectives:

Objective	What the session showed
Explore and name emotions	Every participant drew and labelled her own five circles; the group named hatred, joy, sadness, love and anger
Link emotions to health and family	Dr. Hassan tied emotions to body, mind and how women react at home
Understand self-care	Women discussed why they forget themselves, and Dr. Hassan stressed that only they can care for themselves
Learn practical ways to release anger	Participants proposed gardening and positive activity; Dr. Hassan added drawing, poetry, self-talk and sharing
Rediscover strengths and roles	The tree exercise led women to claim roles as roots, trunk, branches, leaves and flowers
Value peer support	Women were encouraged to listen without judgement and support others; the closing message made activists the carriers of the learning

8. Participant feedback:

Participants were happy with the session, and many experienced a release of tension (catharsis) as they laughed, shared and vented. They said, in paraphrase:

"We laughed openly today."

"We are feeling relaxed."

"We came to know how to control our emotions."

"We learned how to engage ourselves in productive activities."

"We learned not to express anger in a destructive manner."

Reflections and feedback are paraphrased from the facilitator's notes.

Annex: sources:

- [World Health Organization: Mental health: strengthening our response](#)
- [Prevalence and risk factors of anxiety and depression among women in a Karachi community, Journal of the Pakistan Medical Association](#)
- [Delivering maternal mental health through peer volunteers: a 5-year report \(Thinking Healthy Programme Peer-delivered, Rawalpindi\)](#)
- [Drexel University: At any skill level, making art reduces stress hormones \(2016\)](#)
- [Utah State University Extension: Gardening and mental health](#)
- [Lieberman et al. \(2007\). Putting feelings into words: affect labeling disrupts amygdala activity in response to affective stimuli. Psychological Science](#)
- [Fancourt and Finn \(2019\). What is the evidence on the role of the arts in improving health and well-being? A scoping review. WHO Regional Office for Europe](#)
- [Soga, Gaston and Yamaura \(2017\). Gardening is beneficial for health: a meta-analysis. Preventive Medicine Reports](#)
- [Cohen and Wills \(1985\). Stress, social support, and the buffering hypothesis. Psychological Bulletin](#)