Mental Health and Personal Life Challenges of Nepali Migrant Workers

Date: 19 June 2026

Time: 5:00 PM – 8:00 PM (Kathmandu Time)

Venue: Zoom (Virtual Platform)

Facilitators: Sabina Maharjan (Clinical Psychologist), Jeetendra Rai (Psychologist/)

1. Background:

On 19 June 2026, a three-hour virtual webinar titled **"Mental Health and Personal Life Challenges of Nepali Migrant Workers"** was conducted via Zoom. The primary objective of the session was to enhance awareness, destigmatize discussions around mental health, and promote psychosocial wellbeing among Nepali migrant workers stationed abroad.

The webinar provided a structured platform for participants to discuss the emotional, social, and practical adversities associated with cross-border migration. Additionally, the session aimed to build capacity regarding available institutional support mechanisms and foster proactive help-seeking behaviors.

2. Program Commencements & Onboarding

The program commenced with a welcome address and introductory briefing by the facilitator:

- **Demographics:** Participants joined from various geographical locations, including the UAE, Dubai, Israel, and Nepal.
- **Interactive Icebreaker:** To bridge the geographical gap, facilitators utilized a combination of Zoom chat interactions and a Mentimeter activity to map participant locations and expectations.
- **Ground Rules:** To establish a safe, confidential, and respectful learning environment, strict ground rules emphasizing non-judgment, mutual respect, and absolute confidentiality were mutually agreed upon.

3. Thematic Sessions & Key Proceedings

Session I: Foundations of Mental Wellbeing & Demystifying Myths

This foundational segment unpacked the core concepts of mental health and psychological equilibrium.

- **The psychosocial problems:** Facilitators introduced the interconnectedness of thoughts, emotions, behaviors, and physical health.

- **Symptom Identification:** Discussion centered on identifying common psychological vulnerabilities in migrant populations, such as anxiety, depressive symptoms, chronic burnout, sleep disturbances, and acute adjustment disorders.
- **Deconstructing Stigma:** A dedicated segment addressed prevailing cultural myths (e.g., viewing mental illness as a personal weakness or a source of social shame). Facilitators countered these misconceptions with evidence-backed data, repositioning mental health struggles as common, treatable medical conditions.

Session II: Peer-to-Peer Breakout Room Discourse

Participants were divided into smaller breakout rooms to share personal lived experiences and peer insights.

Identified Stressors	Observed Coping Mechanisms
• Extreme workload and prolonged working hours. • Financial insecurity and debt anxiety. • Severe communication and cultural barriers. • Anxiety regarding the wellbeing of left-behind families. • Stigma related mental health issues	• **Adaptive:** Regular digital contact with family, peer counseling, religious/spiritual practices, physical exercise, and music. • **Maladaptive:** Substance/alcohol abuse and progressive social withdrawal, which worsened baseline anxiety.

4. Key Participant Insights & Field Realities

During the main-room plenary session, ground-level insights were spotlighted by the participants:

- Participants noted that cultural adjustment is a two-way challenge. Returning migrants often experience severe reverse-culture shock, struggling to readapt to local food systems, domestic expectations, and shifting household dynamics in Nepal.
- The Family Unit Vulnerability: Mental health issues are not restricted to the migrant worker alone. Left-behind family members encounter distinct psychological stressors. Future interventions must target the holistic family unit.
- Domestic Household Workers: This sub-sector faces extreme isolation due to the nature of their workplaces. Coping mechanisms among domestic workers are often limited to crying, dancing, or fleeting communications with trusted peers.
- The Burden of High Expectations: Migrants face immense pressure from family members and children regarding financial remittances and material demands. To mitigate this stress, some participants shared that they actively practice emotional detachment, mindfulness, and radical acceptance ("letting go") approaches.

5. Help-Seeking Mechanisms & Support Systems

Following a brief recess, the technical team outlined actionable referral pathways and safety nets.

- **Symptom Recognition:** Training was provided on recognizing clinical warning signs requiring immediate intervention, including persistent anhedonia, prolonged insomnia, functional impairment, and expressions of hopelessness.
- **Digital Support Pathways:** Information on verified helplines, institutional networks, and crisis intervention services accessible via low-bandwidth platforms (WhatsApp, Viber, Tele-consultation) was shared.
- **Family as a Protective Factor:** The session emphasized re-engineering communication styles with families. Facilitators highlighted that establishing realistic expectations and open, emotionally supportive dialogue serves as a primary protective barrier against psychological deterioration.

6. Fostering Community Peer Support

The final technical module focused on capitalizing on organic peer networks.

- **The Role of Peers:** Peer support was framed as an essential, first-line tool for reducing situational isolation and fostering resilience.
- **Core Competencies:** Participants were trained in the core competencies of an effective peer responder: **active listening, empathetic reflection, non-judgmental dialogue, and strict confidentiality maintenance.**
- Attendees were explicitly encouraged to act as mental health advocates and safe psychological anchors within their respective workplaces and dormitories.

Testimony: Peer Connection by one of migrant worker

- *A participant recounted receiving an urgent, late-night phone call from a fellow migrant worker experiencing acute emotional distress. Leveraging organic peer-response techniques, the participant stayed on the call for over two hours, providing a virtual sounding board.*
- *The distressed peer expressed deep-seated feelings of anxiety and isolation. By simply being actively heard and validated without judgment for two hours, the caller experienced a profound emotional release. The participant noted that after the prolonged sharing session, both individuals felt an elevated sense of mutual connection, demonstrating that timely peer communication serves as an immediate lifeline when professional services are inaccessible. Also share the importance of peer support.*

7. Strategic Way Forward & Recommendations

The webinar concluded with an interactive Q&A session. While participant evaluations were overwhelmingly positive regarding content quality and facilitator expertise, the following strategic recommendations were formulated for future iterations:

- **Mass Scaling & Broader Dissemination:** To scale beyond limited participant cohorts, the recorded webinar resources, materials, and key findings should be uploaded across multi-sectoral websites and social media platforms for wider public dissemination.

- **Optimized Scheduling:** Fridays represent a high-intensity, rushed transition period for many migrant workers. Future webinars should be scheduled on **Saturdays or Sundays** to maximize accessibility and attendance rates.
- **Targeted Future Curriculums:** Subsequent webinars should explicitly focus on a dedicated, reducing stigma on mental health and inclusion of family member on this webinar could more beneficial.

8. Conclusion

The webinar successfully realized its stated objectives, cultivating a safe, culturally sensitive virtual environment for a historically marginalized demographic. By equipping Nepali migrant workers with diagnostic self-awareness, healthier coping mechanism, and validated referral pathways, the intervention laid a critical foundation for sustained community-driven psychosocial support. The active engagement observed underscores an urgent, ongoing need for accessible, culturally tailored mental health programs for the migrant worker diaspora.

Participant Testimonies

Testimony: Interpersonal stress and financial pressure from family.

"*One of the heaviest burdens we carry is the relentless financial expectation from our families and children back home. Their demands for money and material goods are often completely disconnected from our financial realities abroad. When these pressures become overwhelming, I have had to consciously train myself to practice emotional detachment. Utilizing mindfulness techniques and learning the psychological approach of 'letting go' has been the only way I have managed to protect my own mental wellbeing.*

Testimony: Returned/Returning Migrant Worker (Nepal): Reintegration and reverse adaptation challenges.

"Everyone talks about the difficulty of adapting to a foreign country, but no one prepares you for the difficulty of adapting when you return to Nepal. After years away, coming back home triggers a massive psychological shock. We find ourselves struggling to adapt to the local food, the daily household routines, and the shifting dynamics within our own families. The transition back is a distinct mental health challenge that requires dedicated preparation.