

A Participatory Approach to Developing Adolescent Support Groups Focusing on Social Emotional Wellbeing: Lessons from a Community-Based Intervention Conducted in Gothamipura, Sri Lanka

Prasith Jayatilake^{1*}, Rashmi Gunawardana¹, Nilusha Goonetilleke^{2,3}

¹*Shanthi Maargam, Colombo 08, 00800, Sri Lanka*

²*School of Psychology, Sri Lanka Institute of Information Technology (SLIIT), Malabe, 10115, Sri Lanka*

³*Faculty of Graduate Studies, University of Colombo, Colombo 07, 00700, Sri Lanka*

Corresponding author*: prasithj@gmail.com

Abstract

Adolescent mental health remains a growing concern in underserved urban communities in Sri Lanka. This study aimed to develop a culturally relevant support group model for adolescents in Gothamipura using a participatory approach. The objectives were to create a replicable context-sensitive intervention, enhance social-emotional wellbeing of participating adolescents, and offer a replicable framework for developing community-based psychosocial interventions in similar settings. The methodology involved two phases. The first phase involved focused group discussions and consultations with adolescents to understand social emotional focus areas. The second phase included designing sessions, pilot testing, and multiple feedback and impact assessment sessions. A total of 26 sessions were conducted over 12 months, leading to the development of a support group model with 12 sessions. The model focused on three core areas: emotional awareness, distress tolerance, and interpersonal effectiveness. Session content was refined iteratively based on facilitator observations and participant feedback. Impact assessments showed improved understanding of emotions, greater awareness of distress tolerance strategies, and increased engagement in interpersonal skills, though comprehension levels varied among participants. The structured yet adaptable framework that emerged to develop the model highlights the importance of grounding psychosocial interventions in the lived experiences of adolescents and incorporating continuous feedback throughout the development process. While the model showed promise, limitations included the absence of pre-post quantitative evaluation and challenges in sustaining the intervention beyond facilitator-led sessions. This study contributes to existing knowledge by demonstrating how participatory methods can support the design of locally meaningful psychosocial programs for adolescents in low-resource, and marginalized settings.

Keywords: Community-based intervention, participatory approach, mental health, Adolescents, Gothamipura

Introduction

Adolescent psychosocial wellbeing is a growing concern in many communities in Sri Lanka (Rasalingam et al, 2022), especially in low- and middle-income settings like Gothamipura (Knifton & Inglis, 2020). Gothamipura is considered as an underserved urban community in Colombo, Sri Lanka. Systemic socio-economic marginalization, poor quality infrastructure, economic instability, and limited access to basic services characterize underserved urban areas like Gothamipura (Liyanage & Perera, 2023). Adolescents in underserved settlements are more likely to drop out of school, take informal or unstable jobs, and face social exclusion due to their demographic identity. This cycle limits their options and increases the chance of using substances as a way to cope with daily challenges (Herath, 2021). According to Shanthi Maargam (2024), adolescents in Gothamipura, Obeysekarapura, and Wanathamulla experience generational cycles of violence that contribute to emotional wellbeing difficulties such as stress, low self-esteem, relationship challenges, negative thinking patterns, lack of motivation, and depression. These issues have been escalating between 2022 and 2024 in the mentioned areas. Research shows that increased emotional awareness, distress tolerance, and interpersonal effectiveness are some aspects that help to enhance social-emotional wellbeing of adolescents (Sultan et al., 2023). Adolescents in this area have few safe spaces and opportunities to express their feelings or build coping skills.

Existing models for youth support groups focusing on social emotional wellbeing, often developed elsewhere, do not match the realities of these communities. Moreover, these initiatives have a top-down strategy, with funders and designers making choices with little participation from the community (Wessells, 2018). Since the community does not come up with these interventions, it frequently results in interventions that fall short of meeting the target population's specific needs, particularly in places with significant demands or cultural diversity (Wickramage, 2006). As a result, there was no working model for a locally relevant adolescent support group before this project.

One main reason for this lack of fit is that most interventions do not involve young people in planning or decision-making. This means they miss important cultural and social factors, such as family roles and community attitudes about mental health and psychosocial wellbeing. Without this understanding, programs are less likely to succeed or continue after the project ends.

The aim of this research is to develop a community-based support group model focusing on social emotional wellbeing for adolescents in Gothamipura using youth participatory action research. This was conducted at Shanthi Maargam, a local organization located in Gothamipura, that provides mental health and psychosocial support for children and young people in the community. Shanthi Maargam has long worked with at-risk youth in Gothamipura, making it a trusted entry point for reaching adolescents who might otherwise be difficult to engage.

The objectives of the intervention were, 1) To develop a culturally relevant adolescent support group model that focuses on social emotional wellbeing using a participatory approach in Gothamipura, Sri Lanka; 2) To conduct a needs assessment aimed at identifying themes that can be addressed to enhance the social-emotional wellbeing of participating adolescents; 3) To develop a culturally relevant support group model that enhances the social-emotional wellbeing of participating adolescents by incorporating themes identified through the needs assessment; 4) To provide a framework for developing community-based psychosocial interventions that can be adapted to other culturally diverse or marginalized settings.

Materials and methods

A culturally relevant support group model was developed through a Youth Participatory Action Research (YPAR), with adolescents from the Shanthi Maargam youth club serving as a representative group for adolescents in the Gothamipura community. This approach ensured that the intervention was grounded in the lived experiences and needs of local youth. The work was conducted by the clinical psychologist and the community counsellor who were employed at Shanthi Maargam as consultants at the time of the study. This research study was conducted in two phases. The first phase was the needs assessment phase. The second phase focused on action and impact assessment simultaneously. The following framework (Figure 1) outlines the key steps undertaken during the 12-month development process, including exploratory work, consultation, piloting, feedback collection, and impact assessment—altogether involving 26 sessions that contributed to the finalization of a 12-session support group model. Adolescents aged 14 to 18 participated in the sessions, with attendance ranging from 8 to 12 participants per session. The sessions were planned to be inclusive with no restrictions on the basis of religion, ethnicity, socio-economic background or gender. The final group included an equal number of females and males. However, despite coming from a multi-religious community background, all participants identified their religion as Buddhist and their ethnicity as Sinhala. The majority of participants came from low socioeconomic backgrounds, with household incomes falling below the official poverty line in Colombo. As of April 2025, the poverty line for the Colombo District is Rs. 17,625 (Department of Census and Statistics Sri Lanka, 2024).

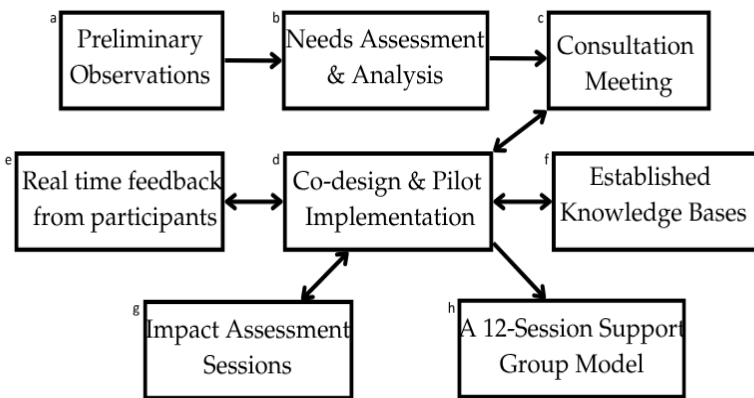


Figure 1: Framework for developing the adolescent social-emotional wellbeing support group model.

a) As an initial step in the development process, ongoing engagement with adolescents from Gothamipura community revealed preliminary observations of concerning patterns—including exposure to violence, substance use, abusive verbal interactions, and high rates of school dropouts—which underscored the need to further explore adolescents’ experiences and assess the demand for structured support. b) Four exploratory sessions were conducted during the initial stage to assess needs, during which qualitative methods—including focused group discussions, art-based activities and a modified genogram—were used to explore adolescents’ intrapersonal and interpersonal experiences, exposure to violence, family relationships, and social dynamics. c) Following the needs assessment, a consultation meeting was held with the adolescent group who participated to review the findings and agree on the key themes that guided the intervention. d) A structured intervention was developed to address the identified

themes, with fifteen pilot sessions delivered and feedback gathered from both participants and facilitators to inform further refinement. e) During the session designing process feedback was collected through four dedicated feedback sessions scheduled between intervention sessions, ongoing participant discussions during the sessions, and facilitator observations, all of which informed iterative adjustments to the session content and structure. f) Participants contributed by prioritizing topics, sharing demographically relevant experiences, and suggesting activities that shaped the session design and structure. Building on these inputs, facilitators integrated relevant theoretical models into the content development such as CBT (Beck, 1976), DBT (Linehan, 1993), and family therapy (Bowen, 1978)—along with non-clinical supportive communication methods and tools like active listening (Rogers, 1961) and the circle of control (Covey, 1989); as this was not a clinical therapeutic intervention, no clinical techniques were used. g) Three impact assessment sessions were conducted to evaluate the effectiveness of the pilot sessions and guide further refinements, with two assessments held after the completion of each key theme and a final assessment conducted after all sessions were completed. h) A 12-session support group model was finalized, with some sessions adjusted or removed based on the feedback received.

This intervention aimed to enhance the social-emotional well-being of adolescents by integrating themes of emotional awareness, distress tolerance, and interpersonal effectiveness—identified through needs assessment sessions—into structured support group sessions. By fostering emotional awareness, the program sought to improve participants' ability to recognize, understand, and regulate their emotions. The incorporation of distress tolerance skills was designed to equip adolescents with adaptive strategies for managing stress and emotional discomfort. Additionally, enhancing interpersonal effectiveness focused on improving communication skills and navigating peer relationship difficulties. These components aimed to build resilience and support positive developmental outcomes in participating adolescents while informing the ongoing development of the support group model. The impact was explored using the dedicated impact assessment sessions.

In this research study ethical clearance was granted by Shanthi Maargam, the hosting organization. However, the study has not sought or granted ethical clearance from any educational institutions. All necessary ethical procedures were followed as per the guidelines of the organization. Adolescents whose parents had provided written consent for participation in Shanthi Maargam activities, and engaged in Shanthi Maargam youth club activities were invited to join the sessions. All participants were informed of the purpose of the group, and their involvement was voluntary. The primary researchers (who conducted the program) had signed a child protection policy as part of their contract with the organization. As is characteristic of YPAR, the focus was on co-creation and practice-based learning rather than data collection. While reflections, participant feedback, and facilitator observations were used to inform session development and assess impact. However, no formal pre-post data was collected or statistically analyzed.

Results

A 12-session repeatable adolescent support group model was developed through a participatory process involving adolescents from the Gothamipura community. The model focused on three key themes identified during the needs assessment phase: emotional awareness, distress tolerance, and interpersonal effectiveness. Table 1 shows a summary of the activities used in the 12-session model.

The sessions followed a gradual progression, beginning with identifying emotions and their physical sensations, then exploring the connection between thoughts and emotions. These discussions led into sessions on distress tolerance and managing difficult emotions, followed by interpersonal skills. Learning was supported through discussions, experiential activities, and culturally relevant examples.

Impact assessment sessions indicated that most participants demonstrated an increased understanding of emotions, including the ability to recognize emotional complexity and apply distress tolerance skills. This was particularly evident in activities such as story creation using visual prompts, where adolescents conveyed characters’ emotional experiences and appropriate coping strategies. However, some participants showed limited comprehension of the connection between thoughts and emotions, which led to the inclusion of a recap session to reinforce the concept. Most adolescents indicated an understanding of the relevance of emotional awareness and its link to physiological responses. A few—particularly those attending with close peer groups—appeared less engaged, due to feeling uncomfortable in sharing their personal concerns among friend groups expecting rejection or ridicule. Notably, across multiple sessions and informal discussions, the value of having a safe and supportive space to connect with peers emerged as a recurring theme. In the final qualitative feedback session, nearly all participants mentioned the sessions as highly important, citing increased emotional awareness, improved emotion regulation (especially regarding anger), and appreciation for the safe group environment that helped to build trust and belonging.

The participatory and iterative development process resulted in a structured framework (as shown in Figure 1) that can inform the design of similar community-based mental health interventions in other culturally diverse settings. Grounded in local experiences and refined through ongoing feedback and facilitator observations, the process offers a practical approach to ensuring that both the intervention content and methods of delivery remain contextually relevant.

Table 1: A summary of the 12-session model focusing on adolescent social emotional wellbeing

Theme	Session Title	Type of Activities/Tools Used
Emotional awareness	Recognizing what we feel	Storytelling with reflective questions, emotions guessing game
	Emotions and the body	Art based body mapping activity with a guessing game
	Thoughts and emotions	Thought matching game, playing a song with reflective questions
	Perspective Taking	Storytelling with reflective questions
Distress tolerance	What’s in our control?	Circle of control, scenario based reflective questions
	Coping with difficult Emotions	Reflective questions, psychoeducation
	Managing anger	Reflective questions, psychoeducation
	Navigating guilt	Thought-provoking video, reflective questions
Interpersonal effectiveness	Active listening	A game: Unlock with listening, reflective questions
	Assertiveness skills	Storytelling with reflective questions
	Responding to peer pressure	Reflective questions
	Consolidation & reflection	Creating a story

Discussion

This study highlights the importance of developing culturally relevant psychosocial interventions through participatory approaches, particularly in underserved urban communities like Gothamipura. It demonstrates that involving adolescents directly in the design and implementation of support groups results in greater engagement and ensures that the intervention reflects the unique social and cultural realities they face. It has been well documented that meaningful youth participation enhances young peoples' sense of connectedness, belonging and value, and this in turn improves psychosocial well-being (Howe et al., 2014). However, this contrasts with many existing intervention models followed by organizations in Sri Lanka, which often follow a top-down approach and fail to address local needs adequately.

While the model shows promise, challenges remain in ensuring that all participants benefit equally, as evidenced by varying levels of comprehension and engagement during sessions. This highlights the need for facilitators to adapt strategies dynamically to accommodate diverse needs and group dynamics, particularly within closely connected peer groups, suggesting that interventions should remain flexible and open to ongoing refinement even after initial development.

The facilitator-led nature of the sessions did not encourage adolescents to independently continue the support groups, affecting sustainability. In contrast community-led approaches, where community members lead the development and implementation of the interventions are more likely to be sustained over time because they build strong local ownership and rely on community-driven action rather than external experts (Wessells, 2018). Furthermore, the developed support group model requires gradual progression during session delivery as the skills being focused during each session are built on the previously discussed skills. Moreover, the feedback sessions were conducted by the same resource team, which may have resulted in social desirability bias and conformity in the responses of participants.

Other limitations include the relatively long development cycle, and the lack of involvement of parents and broader community stakeholders. These factors highlight areas for improvement in future iterations to enhance engagement, ownership, and measurable outcomes.

Conclusion

This study demonstrated the value of using a participatory approach to develop a culturally relevant adolescent support group model focusing on social emotional wellbeing in an underserved urban community. A key limitation was the absence of formal pre- and post-intervention data, which limited the ability to measure impact quantitatively. Future interventions should consider creating models that involve community members leading the facilitation of the intervention to enhance sustainability. It would be beneficial to apply the framework used in this study to design the social-emotional wellbeing support group sessions in future studies. Given the study's focus on a participatory development process, future iterations could incorporate an implementation science evaluation (hybrid type 1 or 2) to strengthen the study design. Moreover, applying quantitative methods utilizing assessments and tools that are adapted and validated for the Sri Lankan context could help better assess the impact of the interventions.

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