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BasicNeeds Ghana Newsletter

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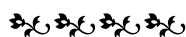
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Better Mental Health, Better Lives

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BasicNeeds Submits Paper to NHIS Review Committee

BasicNeeds-Ghana, in February, 2016, submitted a position paper to the National Health Insurance Scheme (NHIS) Review Committee calling for the inclusion of mental health in the health insurance scheme. The paper was in response to invitation by the NHIS Review Committee for organisations to submit statements for consideration.

In the submission, BasicNeeds and the Alliance For Mental Health and Development (AMHD) expressed, among other things, the view that inclusion of mental health in the NHIS was necessary if mental health in Ghana could be sustainably financed, and ensure its integration into the general health service of the country for the benefit of the poor, vulnerable and marginalised.

The paper was an outcome of a series of consultations and feedback from groups of service users, primary carers, families of persons with mental illness, implementation partners of BasicNeeds and Civil Society Organisations (CSOs) of the AMHD as well as psychiatrists, psychiatric nurses and community mental health officers.

Excerpts From The Position Paper

Even though the Mental Health Act, 2012 (846) stipulates that mental health care services should be provided free of charge, most people accessing mental health care services make out-of-pocket payments for services rendered to them. This is particularly the case with the majority put on psychotropic and anti-epilepsy medicines. This is due to consistent and perennial shortages of such medicines in the public health system. Non-drug therapeutic services are almost nonexistent purely to lack of funds to pay for professional services. The situation has seriously constrained the number of people with mental health care needs who can access the services, especially at the Primary Health Care health facilities.

The mental health fund provided for in the mental health law, as far as we know, has hardly received any funds from the government. It is therefore clear that adequate mental health care can only be realised when there is adequate sustainable financing of both drug and non-drug mental health treatment services.

Finally, it has also been established that the current legal arrangement of the National Health Insurance Act, 2012 (852) makes it difficult for the poorest people in Ghana to benefit from the NHIS as a result of difficulties in identifying indigents.

It is with regard the realities depicted above that the AMHD takes the view and advocates that mental health care should be covered by the NHIS. With the inclusion of mental health treatment services in the NHIS persons that can afford will be able to register and thereby benefit from quality mental health care. Poor and vulnerable persons with mental disorders who cannot afford the premium can then be registered as indigents to appropriately enjoy similar services. This arrangement, it will allow health treatment services to be reimbursed by NHIS and guarantee a steady financial base for mental health care in the country, especially at the district and lower level health care facilities.

The supply, effective distribution and general availability of psychotropic and anti-epilepsy medicines also stand to be greatly enhanced if they are covered under the NHIS for treating mental disorders. Mental health services providers and facilities can also adequately claim payments due them for services rendered. This would motivate private health care service providers to include and provide the needed mental health care to those who need them.

AMHD expects the review committee to use this opportunity to revise and clarify modalities for identifying indigents. Such an exercise will make it possible for the many poor and vulnerable persons with mental health care needs to be effectively reached and supported. One way of doing this is to ensure effective collaboration with and involvement of civil society in the identification and certification of persons who qualify as indigents.

Nurses Receive Maternal Mental Health Training

Health professionals and Traditional Birth Attendants (TBAs) have undergone training in maternal mental health. Those who benefitted included community mental health officers, general nurses, community health nurses, community psychiatric nurses, medical and physician assistants, midwives and traditional birth attendants.



The training was part of capacity building activities to empower these categories of health care professionals provide improved mental health care to pregnant women, mothers and their

Participants at the Jema session of the training

children, as well as young girls, especially those in their reproductive age.

The trainings were funded by the Department for International Development (DFID) under the



Dr Soori taking participants through the Essential Skills manual

project “Enhancing Maternal Mental Health of 30000 pregnant women and mothers and their children to realise maternal and child health in Ghana”.

Health professionals and TBAs from the Brong Ahafo, Northern, Upper West and Upper East Regions have so far benefitted from these practical capacity building sessions.

Resource persons for these training workshops were Dr Mohammed Soori, Consultant Psychiatrist at the Tamale Teaching Hospital and Senior Lecturer at School of Medicine and Health Sciences of the University for Development Studies and Mrs Juliet Atinga, a retired Principal Nursing Officer and public health practitioner.

Beneficiaries were taken through the Essential



The training was made practical through role plays

Skills for Mental Health Care manual. This was intended to re-orient them in basic psychiatry and enable them screen pregnant women and young infants potentially affected by mental illness at pre-natal and post-natal stages.

The participants were also taken through how to screen for mental illness, symptoms of different types of mental disorders and common treatment for different types of mental conditions.



Participants in a pose with the facilitators after the training session in Sunyani

School Mental Health Clubs Formed in JHS/SHS in Eight Districts

School-based Mental Health Clubs have been formed in 47 first and second cycle schools in eight (8) districts in the Northern and Volta Regions.

The formation of these clubs forms part of a DFID funded BasicNeeds-Ghana project titled “Strengthening Community Mental Health Services to improve gender, youth and women mental health in Ghana”. This project is designed to meet the mental health needs of women and the youth who form part of the most vulnerable sections of the population.

To achieve the overall objective of creating awareness on mental disorders and epilepsy among students, school health coordinators from



Patron of the mental health club in Krachi West SHS addressing club members

schools where mental health clubs had been formed were trained on common mental disorders, healthcare information referrals, gender, youth and human rights issues. The training was to build their capacities so as to support members of mental

health clubs to promote healthy lifestyles and well-being among members of the club and to urge them to advocate for quality mental health services. The School Health Co-ordinators were asked to form school based mental health clubs under the auspices of BasicNeeds-Ghana.



Members of the Kpasa SHS Mental Health Club pose for a group picture

BLF/JOAC funded Project Mid-Term Evaluation Completed

Basic Needs - Ghana has undertaken a mid-term evaluation of its project titled “*Empowering People with Mental Illness in Ghana*”. This is a three (3) year project which started in 2014 and is expected to end 2016. It is funded by the Big Lottery Fund (BLF) and Jersey Overseas Aid Commission (JOAC). The evaluation was carried out by an independent external evaluator.



Arishetu Bawa, a master artisan in Karaga District is weaving in a training session with one of two PWMIEs

The project is designed to provide stabilised people with mental illness or epilepsy (PWMIE)

and their primary carers the opportunity to engage in sustainable income generating activities. This intervention is targeting 3750 men and women with mental illness and or epilepsy and 2700 carers in poor rural areas in the Northern, Upper East and Upper West regions. It aims at making it possible for the beneficiaries to collectively voice-out their needs and undertake advocacy for themselves by forming self-help groups (SHGs).



Kaata Doma from Tumu, a person with epilepsy, was supported with a sewing machine for her apprenticeship

The project has so far distributed tools and equipment to more than 200 beneficiaries in the three regions of the North for skills training in soap

making, dress making, and carpentry. Others are undertaking masonry, hair dressing and farming. Other beneficiaries have also been given tools and equipment as start-up support.

The Mid-Term Evaluation was an opportunity to take stock of what had so far been achieved and find out what was to be done in order to meet set targets and outcomes before the eventual completion of the project.

It came to light, during the evaluation, that all the major project activities have been implemented. For instance, all beneficiaries were screened before receiving tools their apprenticeship. The evaluator also reported that all beneficiaries who were undergoing apprenticeship were training with master artisans who had initially been sensitised on how to cope with PWMIEs.

The evaluator's findings further indicated that while more than 90% of those who were to undergo apprenticeship had since began and were at various stages in their training, with some demonstrating that they could sew with little or no supervision from their masters, all those who had received tools and equipment as setup support were earning an average income of between GH¢ 50.00 to GH¢ 100.00 a month.

Interaction with officials of some district assemblies (DAs), the evaluator found out that some of them had made provisions to cater for the needs of PWMIEs in their Medium Term Development Plans. It also came to light that some SHGs in these districts had benefitted from the 2% allocation from the District Assembly Common Fund for Persons With Disability.. Salaga and Kumbungu are among these districts.

Overall, the findings were positive but the evaluator identified that beneficiaries who had received soap-making equipment were yet to undergo training. He reported that of them could not afford the fee charged by the trainers. He, therefore, recommended that the cost of such training should be taken up by BasicNeeds-Ghana.



Umar Amin, a carer in Yendi is using a sewing machine he benefitted from to sew bags for sale

Stabilised People with Mental Illness and Epilepsy Engage in Vegetable Farming

In line with the general objectives of Basic Needs - Ghana, stabilised people with mental illness and epilepsy and their caregivers at Voggu in the Kumbungu District of the Northern Region are being supported in a vegetable gardening project.



Beneficiaries at Voggu in Kumbungu fencing their cultivated plot

This initiative, funded by Johnson & Johnson Company, aims at ensuring that people afflicted by mental illness and epilepsy in the Kumbungu District become productive by engaging in sustainable livelihood activities.

Numbering 15, the beneficiaries are being supported to cultivate vegetables such as kenaf (biri/bira), Spinosus (alefu), etc for consumption

The project began by identifying stabilised people with mental illness or epilepsy interested in cultivating vegetables. An agriculture extension officer was engaged to train the identified beneficiaries in proper land cultivation, manuring, and other organic farming techniques.

Thereafter, the beneficiaries were provided with farming inputs such as chain-link for fencing, seedlings and other farm implements.

With onset of the rains, the field has been ploughed and fenced.

BasicNeeds-Ghana will continue update you on this development intervention.



Beneficiaries watering their vegetable garden from a nearby water source

BasicNeeds Participates in National Mental Health Review Meeting

BasicNeeds-Ghana (BNGh), represented by its Executive Director, participated in a two day National Mental Health review meeting at Ho in the Volta Region. The meeting was organised by the Mental Health Authority of Ghana (MHAG). It was meant to review implementation of mental health activities in 2015 and also share plans of activities for the year 2016. It brought together the national officers of MHAG, all the regional co-ordinators for mental health, and representatives of the Ghana Health Service (GHS), Christian Health Association of Ghana (CHAG) and Ministry of Health. Key development partners in attendance included the World Health Organisation (WHO) and the UK Department for International Development (DFID). Key NGOs working in mental health in attendance included BasicNeeds-Ghana, MEHSOG and Psychosocial (Mental Health) Foundation.

The Executive Director of BasicNeeds-Ghana, Peter Yaro, read out a solidarity message and made a presentation of the activities of BasicNeeds-Ghana in 2015. In his solidarity message, he expressed his appreciation to



*Left to Right: Dr Ebenezer Appiah-Denkyira (DG, GHS)
Prof JB Asare (MHAG BOD Chair), Togbega Debra of
Logba Traditional Area (Chair)*

MHAG for extending an invitation to BasicNeeds to participate in the review and share perspectives with other stakeholders. He further expressed his delight in the forum and described it as a one-stop platform of actors in mental health in Ghana. This, he said, made it possible for best practices and lessons to be shared for effective implementation of mental health initiatives in the country. He further added that this was necessary in order to avoid duplication and unnecessary competition among actors in mental health.



Peter Yaro presenting solidarity message on behalf of BasicNeeds

Focusing on 2015, the Executive Director said the work of BasicNeeds-

Ghana emphasised how the delivery of the BasicNeeds' model for Mental Health and Development (MHD) had contributed towards integrating mental health care into general health care and promoting access to mental health services at the community level. This has made it possible for 26,000 men, women, girls and boys to benefit from mental health treatment services and stabilised with significant reduction of symptoms in their conditions. Up to 15000 beneficiaries were engaged in productive household and income generating activities.

He said that BasicNeeds-Ghana had actively co-operated with GHS to establish community mental health units, adding that there had been a fruitful working relationship with psychiatric nurses and community mental health officers. Mr. Yaro indicated that collaboration with Metropolitan/Municipal/District Assemblies (MMDAs) had made it possible for people with mental health needs to benefit from social protection schemes. In his view, there had been an increase in the inclusion of people with mental illness benefitting from social protection schemes such as the Disability Fund, NHIS coverage and skills development opportunities.

On advocacy and policy influencing, the Executive Director said that BasicNeeds-Ghana continued to play a lead role in mobilising and stimulating civil society organisations, including user groups, to enhance advocacy in mental health. As a result, there had been an improvement in partnership and networking, as well as general discourse on mental health issues.

In conclusion, Mr. Yaro said all these efforts of BasicNeeds-Ghana and others have placed mental health firmly on the map as an important health and development issue that needs the attention of government, the private sector and civil society.



Participants at the National Mental Health Review meeting

Gede Foundation Comes on Board as Franchisee of BasicNeeds

Gede Foundation, a disability advocacy non-governmental organisation located in Abuja, Nigeria, has organised a three (3) day training programme on BasicNeeds' Mental Health and Development (MHD) model.

The orientation session, which took place in the offices of the organisation in Abuja, forms part of a social franchise scheme that aims to equip and give other organisations the opportunity to adopt and use the MHD model in their line of work.

The Executive Director of BasicNeeds-Ghana, Badimak Peter Yaro, facilitated the programme which took place from February 1 - 3, 2016. The number of the Gede Foundation team who participated in the training was nine (9).

The Managing Director of Gede Foundation, John Minto, in his introductory remarks, reminded his team mates of the purpose for Peter Yaro's visit. He expressed his expectation that the training marked the collaboration between the two organisations that would ensure that the capacity of his team is built in the MHD model of BasicNeeds.

Mr. Yaro commended the Gede team for the bold decision to adopt the MHD model in its work. He congratulated Gede Foundation on its decision

to sign on to become social franchise partners of BasicNeeds.

Following these initial remarks, participants were first shown the BasicNeeds organisational structure, specifically where Gede Foundation would be 'located' if the Foundation meets the requirements for due diligence. Mr. Yaro said Gede Foundation will be part of a country programme reporting to BasicNeeds UK, if it was successful in becoming a social franchisee.

The participants spent the rest of the training period going through the five (5) modules of the MHD Model. They also had the opportunity to learn animation techniques and become acquainted with common terminology associated with mental health.

The three-day training ended with speeches of appreciation and goodwill from all participants. Mr. Yaro took the opportunity to state that he was impressed by Gede Foundation's commitment during the training. He added that an opportunity had presented itself for Gede Foundation to apply the model to its work with HIV-AIDS Support Groups. He encouraged the team to reach out to partners who were already well known and motivated in their work.

What people are saying about our work

“I don’t know how to express my gratitude to you BasicNeeds for agreeing to come to our District to help us. We are very grateful and we shall make good use of your existence in our District.”

Confidence Brown, Mental Health Co-ordinator, Twifo Atti-Morkwa District

“Thank you very much BasicNeeds for your efforts at ensuring that mental health education is brought to the fore of students of Chereponi Senior high school. We will make good use of this opportunity to learn more about mental illness and to also create awareness among members of the society.”

Mr Tieba Kojo Karim, School Health Co-ordinator of Chereponi Senior High School

“As for BasicNeeds, they are committed to issues of mental illness and epilepsy and we are so happy that the youth are given much attention. We will work closely with you to ensure that issues of mental illness receive the needed attention.”

Dr. Issahaque Munawaru, Headmaster of Salaga T.I. Ahmadiya Senior High School.

“ We are living in a world where mental illness is part and parcel of us and for an Organization like BasicNeeds Ghana coming to ensure that our students are educated on mental illness, it is a big milestone for BasicNeeds and we say a big thank you to you BasicNeeds. ”

Mr Liwalmor Bakpiri Moses, Vice Principal of St Joseph’s Technical Institute, Saboba

