Psychosocial rehabilitation activities at community level

MENTAL HEALTH

Even prior to the devastating earthquake, the need for strengthened mental health and psychological support across Haiti was prevalent. With the earthquake that need was multiplied and magnified. It is estimated that the prevalence of people suffering from mental and psychological disorders has increased. Public mental health services are restricted to the tertiary care level; they are also centralized and concentrated in two main facilities: the Centre de Psychiatrie Mars & Kline, which is located in Port au Prince, and the psychiatric hospital, Défilée de Beudet, which is located outside of the capital. Together, both hospitals have a capacity of 180 psychiatric beds and both offer external consultation services as well. Mental health services have not been integrated into the public health system. Instead, all mental health ambulatory services as well as the community approach rely on national and international NGOs.

Immediately after the earthquake, a Cross-Cluster Working Group on Mental Health and Psychological Support (MHPS) was created, coordinated by UNICEF and IOM but with active participation and leadership from PAHO/WHO in support of the MSPP. Following the earthquake, UNICEF, IOM, International Medical Corps, Partners in Health, Médecins du Monde (MDM) and Médecins sans Frontiers (MSF) were all providing mental health services – it was estimated that at one point over 110 different organizations were providing mental health care.

More than a year after the earthquake, many NGOs have left, while the need for a sustainable mental health care program in Haiti persists. PAHO/WHO continues to work with the MSPP to develop a National Mental Health Policy and a National Mental Health Strategic Plan and will provide support for the mobilization of resources to implement it.

Activities carried out:

Post-earthquake activities:

- PAHO/WHO strengthened its technical cooperation by recruiting a mental health consultant to the Country Office in Haiti, with back-stopping from a PAHO/WHO Subregional Advisor on Mental Health.
- PAHO/WHO participated in and was one of the leading agencies in the MHPSS Cross-Cluster Working Group, which, working together with the MSPP, established a 3-month work plan in April.
- PAHO/WHO supported the MSPP in the development of its first National Integrated and Inter-organizational Plan on Psychological Emergencies, Mental Health and Psychological Support, which focused on the decentralization of mental health care and the integration of mental health services at the primary health care level and in main public hospitals.
- A mental health team from the Dominican Republic was deployed to the General Hospital of Jimaní, along the Haiti/DR border, consisting of a psychiatrist, 4 psychologists and 3 specialized nurses. A plan was developed to provide psychosocial and mental health support to patients in 5 other institutions in the border region.

Regular Technical Cooperation Program:

- PAHO/WHO together with the MSPP completed an evaluation of the mental health system in Haiti, using the WHO Assessment Instrument for Mental Health Systems (WHO-AIMS).
- PAHO/WHO is working with the MSPP in its development of a National Plan for mental health, following the guidelines established by the “Strategy and Plan of Action on Mental Health” for the Region of the Americas.
- PAHO/WHO staff attended a presentation on the Mental Health Global Action Program (MHGAP). Together with the MSPP the decision has been made to focus on the priorities of depression and developmental disorders in Haiti.
- An instrument within the MHGAP used to evaluate children’s mental development is being incorporated into the integrated package of services offered through the Free Obstetric and Free Child Care Projects (SIG/SOG) for children under 5 year of age.
- A proposal of a national essential psychotropic drug list is in its final phase.
- In fact, the mental health component has proven to be of added value during the cholera emergency response; able to be coordinated with health, health promotion, social mobilization and risk communication sectors.

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Challenges and next steps:

- Review and analysis of the results of the WHO-AIMS in Haiti.
- Work with the MSPP to develop a national mental health plan that will work to decentralize mental health services and to incorporate mental health into primary health care services.
- Work with the MSPP and mobilizing funds to establish 18 community mental health teams (54 health professionals and their training) each team consisting of: 1 doctor or psychiatrist, 1 psychologist and 1 nurse.
- Training of trainers on the priorities and modules found in the MHGAP and subsequently training of primary health care workers on the MHGAP, especially those regarding depression and developmental disorders.
- Development and implementation of a course on human rights and mental health, for professionals working in the psychiatric hospitals.
- A study will be conducted of psychiatric hospital patients to investigate opportunities for rehabilitation and societal reintegration.
- Creation of a database for basic information regarding psychiatric hospital activities.
- Mobilization of more funds for mental health related activities will be needed in 2011.