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BACKGROUND

- Only 10-20% people in Nepal have access to basic mental health care (1)
- Dang district of Nepal with population >600,000 had no formal mental health services until Health Foundation Nepal (HFN), a non-profit organization in the United States and Nepal, started the mental health services in 2018 (2)

OBJECTIVES

- Describe the process of the mental health projects of HFN
- Discuss the outcomes of the initiatives so far

MAJOR MENTAL HEALTH INITIATIVES AND ACHIEVEMENTS

Since 2018: Addressing stigma and promoting evidence based practices

- 3-4 community mental health awareness events per month
- Increasing beneficiaries in the community
- 4 major studies conducted and another one is ongoing



Since 2019: Integration of mental health care in the primary healthcare centers

- Already integrated in 5 health centers as of 2020
- Aim to integrate in 20 more health centers by 2021
- Task shifting by providing basic psychiatric training to the local primary care providers and the community mental health workers

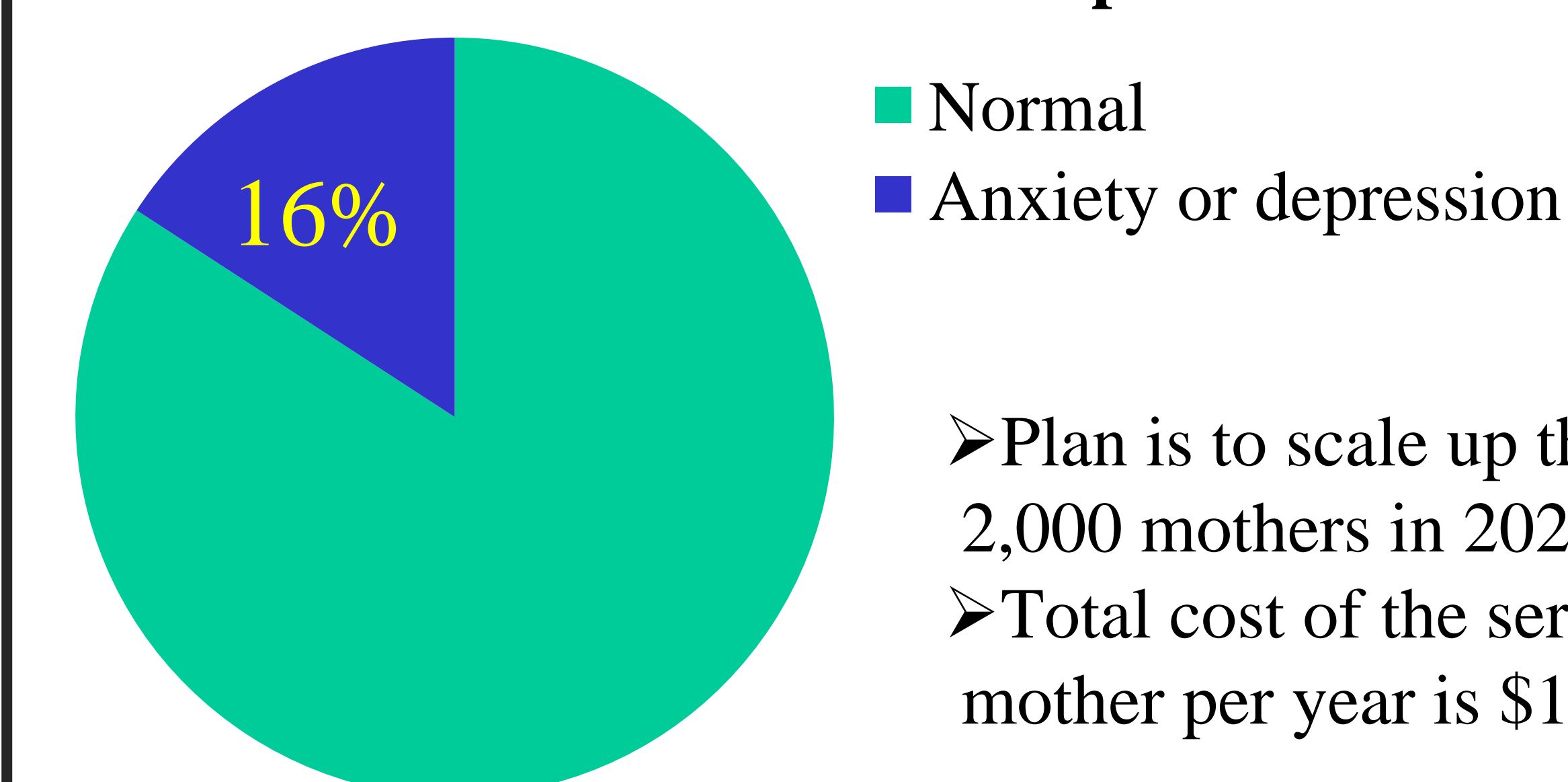
Since 2019: Introduction of a community based maternal mental health program, first of its kind in the country

- Community based maternal mental health program
- Supervision and monitoring from volunteer psychiatrists and psychologists from Kathmandu and the USA
- Individual and group counseling in the community
- Medication management and referral to higher centers as needed



Home visit and counseling

Prevalence of maternal depression and anxiety: N=1,017



- Plan is to scale up the program and serve 2,000 mothers in 2021
- Total cost of the service for HFN per mother per year is \$10 or less

Regional center for the integrated mental health is under construction

- All the services are provided free of cost to the community people
- Volunteering of HFN leaders, strong support from local community, and financial support from the people who love Nepal



Since 2020: Psychiatric care and rehabilitation center, first of its kind in the country

- ❑ Shelter, general medical care and psychiatric services led by a general physician, and volunteer consultants from Kathmandu and the USA
- ❑ Recovery and rehabilitation services utilizing available local resources
- ❑ 10 people with SMI receiving the ongoing care, and the demand is increasing

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2. America Nepal Medical Foundation
3. Movement for Inspiration Nepal
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5. Community people of Dang, Nepal
6. HFN volunteers

References:

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2. www.healthfoundationnepal.org

Conclusion:

- ❖ It is possible to translate mental health ideas into action even in the resource limited communities in the world including that in Nepal
- ❖ Challenges of financial sustainability needs to be addressed