



# Smile Mother: A Community Maternal Mental Health Program in Western Nepal

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## Background

- Maternal mental health (MMH) disorders are prevalent in over 24% women and are a primary cause of perinatal mortality in low- and middle-income countries (LMICs) (1)
- In most LMICs, the maternal mental health agenda has not been integrated into the primary health care (PHC) system.
- Health Foundation Nepal (HFN), a non-profit organization based in the Dang District of Nepal, has implemented a longitudinal interventional community program titled "Smile Mother" in 4 communities of Ghorahi sub-metropolitan city, focusing on MMH

## Objective

- To describe the sustainable community-based maternal mental health care model of HFN in Nepal
- To evaluate the prevalence of the perinatal anxiety and depression in Western Nepal

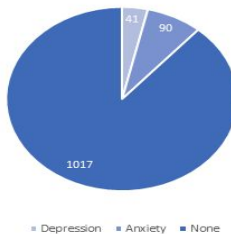
## Methodology

Psychosocial counselors, local community health workers (CHW), nurses, physicians, and public health officers conduct a community outreach survey

A semi-structured mental health screening checklist is used for case identification, counseling, referrals, and admission in a residential facility for integrated psychiatric care and rehabilitation care

Provide longitudinal therapeutic intervention by trained psychosocial counselors, nurses and medical officers with counseling and medication under the virtual supervision of experts from the United States and capital city of Nepal.

Women screened in Smile Mother campaign from Jan 2022-Dec 2022



## Results

- Reviewed the HFN protocol for the Smile Mothers Campaign and reviewed the data (duration: 2019-2022, specifically, the data from 2022)
- HFN has screened MMH disorders and provided psychosocial, educational, supportive, and therapeutic interventions to **497 pregnant women and 1073 postpartum women from May 2021 to Jan 2023. Over 2600 women have been screened since 2019.**
- In 2022, out of **1148 new cases** screened, **90 women (43 pregnant; 47 postpartum) had anxiety** and **41 women (16 pregnant, 25 postpartum) had depression**
- In 2022, individual counselling was provided to 286 women, couple counselling to 7 women, family counselling to 15 women and group counselling to 3 women

	Total		
	Post-partum	Pregnant	Total
New cases	749	399	1148
Follow up cases	782	286	1068

Table 1: Total number of women in peripartum period screened from Jan 2022-Dec 2022

Table 2: Number of women with anxiety and depression from Jan 2022-Dec 2022

	Total						Total		
	Pregnant			Post-partum			Mild	Moderate	Severe
Mental Illness									
General Anxiety	37	5	1	42	5	0	79	10	1
Depression	11	5	0	18	6	1	29	11	1

## Discussions and conclusion

- Maternal mental health is an indicator of the global burden of disease.
- In a resource-limited setting, a team based, community-owned, cost-effective mental health care model can assist in bridging the gap of MMH promotion and prevention (2)
- For long term effectiveness, plans to create awareness about common maternal mental health disorders, collaborate with local stakeholders regarding mental health (school, health post, ward, municipality)
- Training of local community members in maternal mental health subject
- Recruitment of around 15 CHW for facilitating the program
- Collaboration with various governmental and non-governmental stakeholders has successfully developed an effective community outreach program
- Plans to further extend the program with community ownership in other parts of the country



Fig: Screening postpartum women for depression and anxiety by senior counselors

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