# Public Mental Health Strategies I: Intervention Models

Public Mental Health in Nepal: Training of District Public Health Officers

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# 1. School mental health program: Background

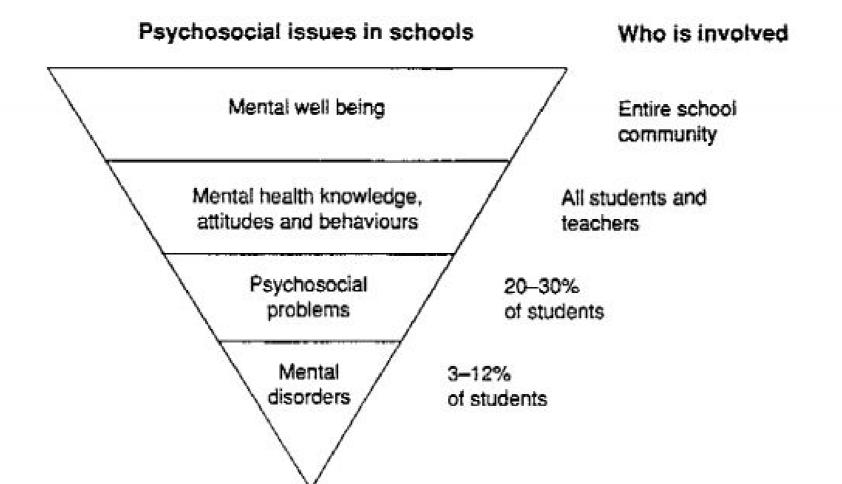
- The mental health and wellbeing of our children requires our attention.
- All young people today face significant stresses in their life due to-
  - Normal growing e.g. Growth and hormonal changes
  - Changes in relationship with parents and society
  - Individual
- We can help them through programs that include life skill education, mental health education, school based health interventions, when indicated, professional treatment.

## Mental Health School Health Program: Rationale

- Individual stress involves:
  - Pressure to advance in school and to earn a living
  - Peer pressure
  - Family moves/parental fighting and divorce
  - School change
  - Substance abuse
  - Sexual and physical mistreatment
  - AIDS/Severe or chronic illness/hospitalizations etc.
- Young people negotiate these stresses with varying degrees of resilience and mastery.

#### 3. A Model Framework For School Mental Health Programmes

The following diagram illustrates the psychosocial and mental health issues present in all schools and indicates who is likely to be affected by these issues:



### School Health Programs Interventions

- Psychosocial programs targeting formal and informal education settings in Nepal have included promoting recreational activities and implementation of the Classroom-Based Intervention (CBI), a 15session intervention that combines elements from creative-expressive therapy, cooperative play, and cognitive behavioral techniques.
- CBI demonstrated effectiveness in improving prosocial behavior among girls, reducing psychological difficulties and aggression among boys, and increasing hope among older children

### A Practice: During disaster in Nepal

 Another example of how the education sector has been used as a platform for implementing services is a 3-year project that aimed to disseminate knowledge about Disaster Risk Reduction (DRR) through schools in four districts in Nepal, thereby reducing vulnerability to disasters. 2. Suicide Prevention Program Interventions

#### **Prevention of Suicides**

- Assessment of
  - Risk factors
  - Warning signs
  - Protective measures
  - Preventive measures

#### Risk Factors for Suicide

- Previous suicide attempt(s)
- A history of suicide in the family
- Substance misuse
- Mood disorders (depression, bipolar disorder)
- Access to lethal means (e.g., keeping insecticides, ropes, weapons etc. in the home)
- Losses and other events (for example, the breakup of a relationship or a death, academic failures, legal difficulties, financial difficulties, bullying)
- History of trauma or abuse
- Chronic physical illness, including chronic pain
- Exposure to the suicidal behavior of others

### Warning Signs of Suicide

- Often talking or writing about death, dying, or suicide
- Making comments about being hopeless, helpless or worthless
- Expressions of having no reason for living; no sense of purpose in life; saying things like "It would be better if I wasn't here" or "I want out"
- Increased alcohol and/or drug misuse
- Withdrawal from friends, family and community
- Reckless behavior or more risky activities, seemingly without thinking
- Dramatic mood changes
- Talking about feeling trapped or being a burden to others

#### Protective measures

- Mental health treatment and psychosocial support should be made available to mentally ill and suicide attempters.
- Strong connections to individuals, family, community and social institutions
- Problem-solving and conflict resolution skills
- Contacts with providers (e.g., follow-up phone call from health care professional)

#### Preventive measures

• Controlling sale of pesticides/poisons, certain medications, etc. or implementing communal storage of pesticides

Reporting by media in a responsible way;

Introducing alcohol policies to reduce the harmful use of alcohol;

Ref: WHO

#### Preventive measures cont.

- Early identification, treatment and care of people with mental and substance use disorders, chronic pain and acute emotional distress;
- Training of non-specialized health workers in the assessment and management of suicidal behaviour;
- Follow-up care for people who attempted suicide and provision of community support.

Suicide is preventable

## 3. Mental health service in workplace intervention

#### Mental Health in Workplace: Pre-disposing factors

- Key factors include:
  - workload (both excessive and insufficient work);
  - lack of participation and control in the workplace;
  - monotonous or unpleasant tasks;
  - role ambiguity or conflict;
  - lack of recognition at work;

## Key factors include cont.

- inequity;
- poor interpersonal relationships;
- poor working conditions;
- poor leadership and communication;
- conflicting home and work demands.

## Mental Health in Workplace: Options for strategies

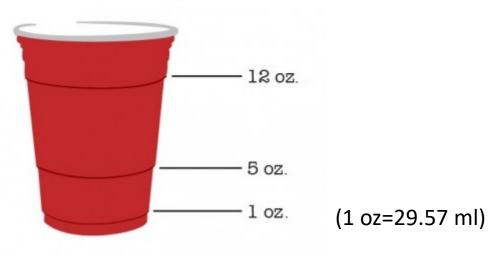
- increasing employee awareness of mental health issues;
- supporting employees at risk;
- providing treatment for employees with a mental health problem;
- changing the organization of work;
- reintegrating employees with a mental health problem into the workplace.
- Safety, working conditions, job satisfaction, etc.

#### 4. Alcohol Harm Reduction Interventions

#### **Alcohol Harm Reduction**

Do the math:
 one drink = 12 oz. beer
 one drink = 4 to 5 oz. of wine
 one drink = 1 oz. of hard alcohol

#### Solo Cup Fact.



- Our body metabolizes approximately one alcoholic drink per hour there is no way of speeding it up
- Alcohol is a drug—it is an addictive substance that changes our brain chemistry and can cause chemical dependency

### Alcohol Harm Reduction Program

- How to be safe
  - Drink no more than one drink per hour
  - If you are going somewhere, make sure to have a designated driver
  - Try not to drink when you are having emotional distress—do something else: exercise, call a friend, read a book or find a way to relax
- Plan ahead
  - Eat before you drink anything
  - Ask a friend to keep an eye on you
  - Set a limit on how many drinks you're going to have
  - Never leave your drink unattended
  - Prepare to say no if you're offered drinks by others

### Alcohol Harm Reduction Program

- All kinds of direct and indirect advertisement should be prohibited.
- Progressive taxation system should be put in place
- Limiting sale of alcohol at certain times or in certain locations
- Meeting with stakeholders

5. Public Mental Health Promotion Interventions

## Awareness raising/stigma reduction activities:

- Strengthen social networks: facilitate or create venues for activities that promote social network building, such as women's groups
- Inform and educate public about important issues in mental health,
- Raise awareness to reduce stigma and discrimination towards people living with mental health problems using means of
  - media,
  - rallies,
  - dramas,
  - talk programs, etc.

## Mental health promotional activities

 Promoting spiritual wellbeing: engage and support faith, belief driven, positive cultural practices, yogic and meditative practices

 Strengthen social networks: facilitate or create venues for activities that promote social network building, such as women's groups

## Spiritual wellbeing

- Attending a local place of worship (Church, Temple, Mosque etc) for prayer or devotion.
- Joining a group, club or society which shares your spiritual or religious outlook
- Meeting regularly with someone who can help you reflect on your life and your spirituality
- Engaging with the arts.

## Benefits of spiritual well-being

Maintaining balance and control of life

Building relationships

Feeling purpose and meaning in life

Accepting and growing from the challenges of life

## Queries?

## Thank You.