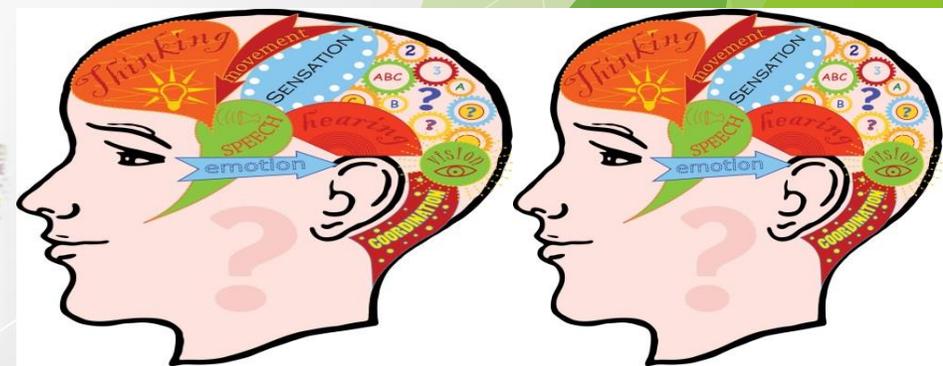
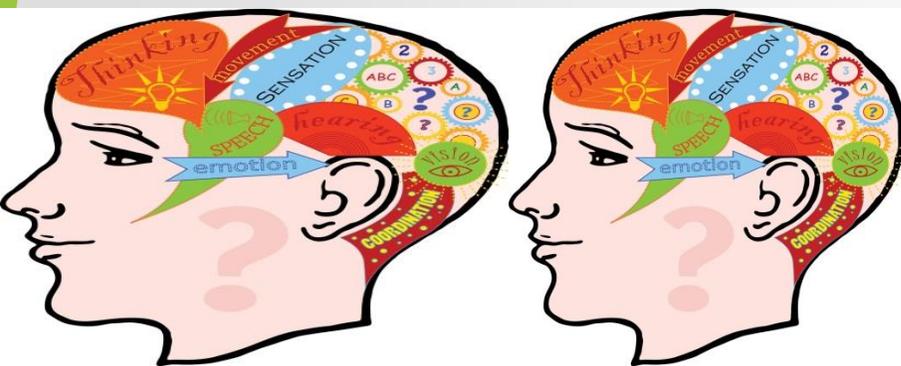


Transforming Lives: *Mental Health Care of the Community*

Lourdes Ladrido-Ignacio MD

Professor Emeritus of Psychiatry

University of the Philippines



A healthy individual is one who is in a state of equilibrium, possessing a harmonious sense of physical and psychosocial “wholeness” (Ignacio, 2000)



- ▶ *“ Health for all “,*
- ▶ *“Universal Health Care” ,*
has been articulated for decades now
- ▶ *....an articulation of every individual’s human right to available, accessible and quality health care,*
- ▶ *....and rightly so, because the very definition of HEALTH is,*
- ▶ *“the state of the physical mental and social well being and,*
- ▶ *not the absence of ill-health or illness.*

- ▶ Yet,
- ▶ - the Director General of the WHO in 2008, in presenting the MH Global Action Program ,
- ▶ - the editorial of “World Psychiatry” (October 2012) of the World Psychiatric Association, calls attention to:

- ▶ *“More than ever, it is urgent to address the MH of a population,*
- ▶ *Mental disorders are highly persistent, prevalent and burdensome worldwide. Ex; schizophrenia, depression among the medically ill suffering from chronic non-communicable diseases*
- ▶ *, Aggravating this, the increasing number of survivors, (children, adults, elderly, disabled etc.) of extreme life experiences, (disasters, violence in the home and the streets, terrorism, armed conflict, etc.) plagued in their ordinary, socially disadvantaged lives , by the disabling psychosocial consequences of these adversities.”*





The resources to deliver MH treatment for the majority of those who need this, continue,

are insufficient, inequitably distributed , inadequately utilized if at all available, unable to reach patients , hence untreated and,

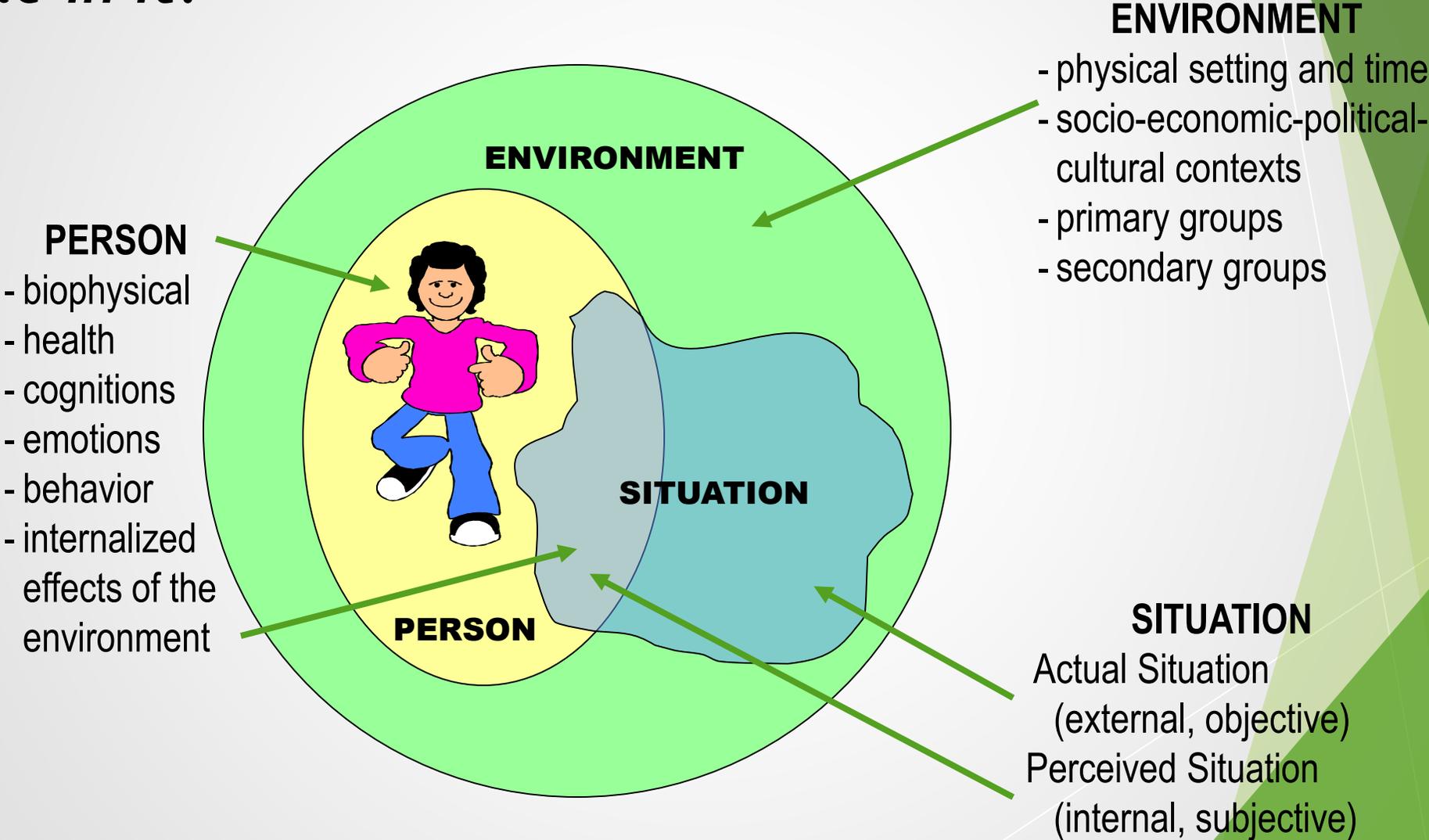
the aggravating psychosocial consequences of extreme life experiences and adversities, necessitate a broader view, because,

One cannot ignore the interconnectedness of the individual and his community, in addressing health care needs .

As early as 1978, the WHO declared that “Health for All is the framework for health care to address not only the treatment of illnesses but the promotion of health and well being of the human community.

The primary health care concept is the strategy to achieve this.

What happens to the individual affects the community; the state of his community affects the people in it.



The WHO Collaborative Study for Extending MH care in General Care

- ▶ In 7 developing countries including the Philippines
- ▶ Philippines-- the Study was conducted in primary health care centers in an urban slum of Balic Balic, Sampaloc, Manila in collaboration with the Manila Health Dept.
- ▶ Subsequent validation of the results and experiences of the study was conducted in a rural area covering three towns of Bulacan, in central Luzon, later applied in other areas of the country including those affected by disasters.
- ▶ Mental health care in the community, at this level of care was proved feasible through the training of existing health staff
- ▶ Mental health care is integrated the daily health care activities of trained health workers at the primary level of health care. It is not therefore a specialty service as is a traditional view to health care.



Training Health Workers in Mental health

- ▶ *Training health professionals and community health workers has for its ultimate goal the awareness and recognition that there is no health without mental health.*
- ▶ *As they perform their tasks to deliver the basic health services mandated of them, their training:*
 - a. *leads to a reorientation from the biomedical orientation to health care to a truly holistic view, calling attention to the interconnectedness of the body -mind - environment i.e., the individual and the community*
 - b. *clear understanding of the basic needs of man to be healthy which includes to have mental health and well being.*
 - c. *skill to listen establish rapport and engage patient in the consultation for his health problem*
 - d. *skill in allowing patient to express feelings thoughts about symptoms/illness and discuss treatment which include considerations of his social situation.*
 - e. *knowledge and skill in understanding stress, grief and crises in daily life, especially as they relate to physical symptoms.*



Training health staff: (cont)

► Method of Training :

1. -formal: 4-5 day classroom

-monthly supervision and mentoring for at least a year with easy access to psychiatrist or MH professional as trainers

2. use of languagesimple generally devoid of technical terms, descriptive, in the language of the trainees

3. actively participative allowing for the trainees to express their personal experiences

4. non -judgemental and drawing maximal support from superiors, allowing of their own awareness of the empathy they can express towards their patients, their families and those they work with.





Training of Health Workers in Mental Health:
- *a case vignette from a nurse in the rural
health center*

Training of health workers : a case vignette from a Nurse in the RHU

- ▶ “I was seeing patients in the family planning clinic ; one of the women had a “black eye”. When I asked her about it, tears flowed and she asked me to help her with her situation at home...an alcoholic physically abusive husband who practically every night in drunkenness would beat her and her 3 young children, up, at one time dislocating her shoulder for which she sought a local healer to hide it from her relatives. Afraid that separation from him would lead to aggravation of her poverty since she had to stay home to take care of her children, she endured this domestic violence for ten years.
- ▶ I felt very strongly that I should visit her at home and find out how I can further help her. There I met and engaged her husband’s sister, who lived nearby, to help me meet her husband to start working out their problems at home. We were also advised by our physician to refer this patient to a women’s crisis center in the city so that she could gain emotional strength to protect herself and her children from the physically abusive husband and start regaining her sense of being a person with dignity and pride, despite her poverty.
- ▶ It has been easy to help this patient in the rural health clinic because she simply came for the supply of her contraceptive pills. It did not take much from me because it was almost mechanical. But although it was not easy to manage this patient’s psychosocial problem, my listening and helping her left me very satisfied with myself. I right away did not understand this feeling of satisfaction, but this same feeling led me to be aware of the fact that there were other patients in the family planning clinic in the same situation. I started to put in more time listening to their stories , work out the specific situation in their homes by engaging other family members to support my patients gain the necessary emotional strength and empowerment to be able to handle their abusive husbands and be treated like any other human being with dignity. Although not all the husbands participated in coming for working out this problem, some because of their unmarried status, simply left, I feel I have started to help my patients not just in the rather mechanical way of dispensing contraceptive pills to limit their number of children, but what seemed more important,...to live a life of peace, dignity and well being..
- ▶ This patient and her husband through the help of his sister, the women’s crisis center , our physician in the RHU, the barangay health workers (all of us had MH training) have since been able to work out this problem. The patient continue to join our support group, the husband through his family has gained a productive livelihood and has reduced his drinking, conscious of avoiding his physically abusive behavior, having been threatened once with imprisonment. The patient has been thankful to us for this help.
- ▶ My MH training has given me a new way of looking at myself as a nurse in the community. Being a nurse, I need not be confined with doing health center activities and deliver the basic health services as mandated. I have been able to see that a patient is a human being experiencing stress and crises in her life that can be pervasive and render her “sick”. I also have realized that having gained this new perspective has made me feel more satisfied with my work in the health center. I have since been active in programs that advocate for the rights of women, not only among those who come for consultation at our rural health center, but those in the barangays where I live, and among those in the church groups where I worship. “



► *this case vignette has shown:*

the training of the RHU nurse has provided her the knowledge and skill in MH care to have been able to respond more appropriately to the needs for health care of the battered wife in front of her,

ordinarily she would simply count this patient as her statistics of “family planning acceptors”.

having gained the belief that she can listen to a patient, and help her through the pervasive crises in her life led her to a more satisfactory patient care.

she stated with confidence, that this has given her a transformation, a new perspective in her being a nurse .

► *that in addition to being a nurse , she is also a health worker capable of helping a patient cope with difficult situations in daily life.*

that when she undertook the latter, her patient not only experienced healing from her wounds from her husband’s beating but her dignity, well being and peace in her daily life.

she has witnessed through her help, her patient gaining physical and emotional strength in carrying her life as mother for her children, and in preventing and minimizing the trauma they would have experienced from their physically abusive father .

she has also witnessed, through sharing her patient become a more active member of her church group providing support to others in similar situations of “battering” and this time,

she has joined these other women in expressing a sense of empowerment to “stand up” for herself in the face of the adversity at home and in her community.



- ▶ Programs for the promotion of mental health and well being can not be isolated from health promotion programs in general, simply because health is a state of physical mental, social and spiritual well being
- ▶ (Body-Mind-Social Environment) is interconnected ; To be healthy, man must experience a state of equilibrium, a harmonious physical and psychological “wholeness”, with those around him.
- ▶ In this state, he feels physically well, his thoughts are organized, his feeling is well modulated , his behaviors coordinated and appropriate to his situation. He feels part of the group and is able to fulfill his role within it, and he



- ▶ *The promotion of mental health hinges on the health professionals and health workers themselves.*

*They need to realize that they can not ignore:
the reality of the interconnectedness of the individual and his social environment ,
and that there is no health without mental health*

- ▶ An important strategy is the development of the capacity in the existing health staff to know and acquire the skills in mental health so that they can integrate this in their armamentarium of skills in their daily health care activities.

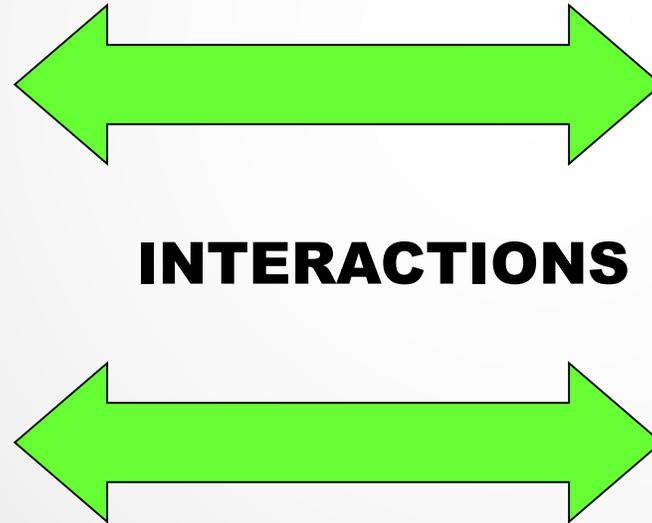


(Body-Mind-Social Environment) is Interconnected

Person's needs, capacities, and activities



PERSON



ENVIRONMENT

Mental Health Care is a Continuing Saga in Transforming People's Lives

- ▶ *Providing the health staff, (ex: nurse) training and capacity to address the mental health needs of her patient leads to a new perspective, a transformation in her self as she undertakes her ordinary daily health care activities, making her feel a sense of gratification in her work.*
- ▶ *This leads her to provide the kind of health care, that does not only treat the symptoms,*
- ▶ *But a truly holistic view which integrates care to address the physical, mental social and spiritual needs of man, which results in a sense of dignity, health, and well being in her self as a health worker/professional.*
- ▶ *This spins off in the kind of care she extends to her patient,*
- ▶ *Allowing them to experience well being, and some degree of peace in their daily lives.*

stand up against stigma

No Health without
Mental Health



▶ *Maraming salamat po,*
(thank you very much)