

Research Newsletter



Publications of BasicNeeds in 2007-2009

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BasicNeeds' external publications

Message from Chris Underhill

At BasicNeeds we are undergoing a big push to move our organisation into new structures whereby a number of our country branches become independent with their own boards of governance. Our project work is bright with some wonderful new examples of practice going ahead whilst our older programmes are showing true grit as we enter our tenth anniversary. All of this work is underpinned by our knowledge based programmes including our research and policy work. With a database that now spells out our quantitative achievement and a significant roll call of publications the research work of the organisation not only underpins BasicNeeds it also adds greatly to its effectiveness and reputation.

April

2010

Editor's note

Welcome to the second edition of BasicNeeds' Research Newsletter. In the first section we present interesting evidence of practice from BasicNeeds' field programmes. The next section gives you news about research undertaken by BasicNeeds in 2009. Finally we present to you a monograph on Community Mental Health Practice published recently by BasicNeeds.

In 2007-2009, BasicNeeds produced 30 publications which are listed on this page to your left.

We welcome your feedback and comments.

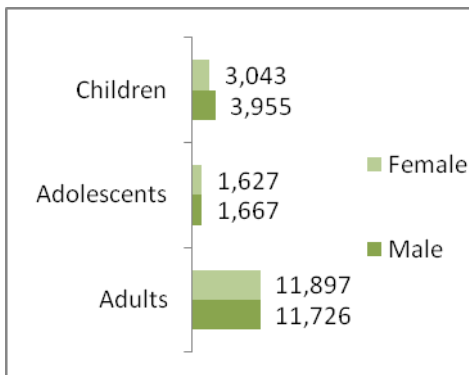
Evidence of Practice

1. Statistics

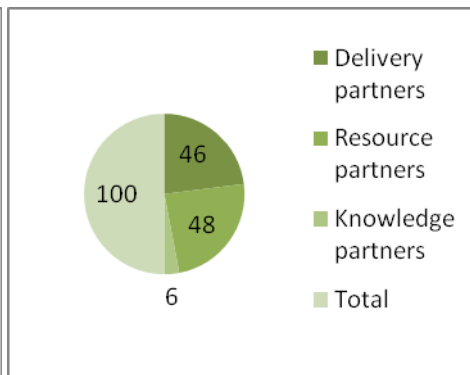
People with mental illness or epilepsy reached by BasicNeeds programmes as on 31st December 2009

Diagnosis →	Epilepsy	Anxiety	Depression	Schizophrenia	Unspecified Psychosis	Bipolar Disorder	Depression with Psychotic Symptoms	Other Disorders	Diagnosis not known	Dropped out	Total
Country ↓											
Ghana	9997	231	600	1772	3232	14	106	2433	131	1116	17400
Kenya	698	70	269	562	301	107	4	520	912	0	3443
Lao PDR	147	268	48	90	30	10	3	117	1	3	711
Tanzania	1595	1	90	768	27	42	0	3	0	0	2526
Uganda	4652	71	202	107	59	159	17	214	24	0	5505
Sri Lanka	271	18	657	468	104	94	12	998	1488	0	4110
Nepal	74	34	21	17	0	48	0	25	1	0	220
Total	17434	693	1887	3784	3753	474	142	4310	2557		33915

Total reached by age group



BasicNeeds' Partners



Our statistics comes from basic data collected for every individual who is a participant in BasicNeeds' programmes. This data is entered into a customized Access database. Data is then retrieved and consolidated every three months, and presented by all field programmes in a standardized Statistical Tracking Sheet (STS). Data for new programme entrants is

systematically recorded, and entered into the Access database within the quarter and thus included in the quarterly consolidations in the STS. All Individual data is available in BasicNeeds programme offices.

2. Ensuring better mental health services through Mental Health Clinics



- The term mental health clinic also covers outreach clinics and mental health camps (camps is a term used in Sri Lanka and Nepal) and refers to locations where clinical services are available for people with mental illness and epilepsy.
- Services available at Mental Health Clinics include assessment, diagnosis, prescription, dispensing psychiatric medicines, counselling,

Country	No. of MH clinics held in 2009
Ghana	279
Kenya	385
Uganda	72
Tanzania	324
Lao PDR	314
Sri Lanka	512
Nepal	3
Total	1889

review and making referrals.

- The clinics are held in any of the following places: hospitals, health centres, health posts, dispensaries as well as locations such as temples, schools etc and the frequency of the clinics varies in each programme site ranging from weekly to monthly to quarterly.

3. User- Carer Self Help Groups

Country	Number of SHGs	Total members
Kenya	93	2523
Ghana	153	10,730
Uganda	40	1586
Tanzania	88	671
Lao PDR	6	263
Sri Lanka	277	2697
Nepal	2	13
Total	659	18,483

The functions that Self Help Groups (SHGs) in BasicNeeds' programmes undertake include providing support to fellow members, income generating activities and gradually, now, advocacy. At the end of 2009, there were 18,483 members in 659 SHGs in 7 countries. In Ghana - BasicNeeds' largest field programme - there are now 40 District Associations with representatives from the 153 SHGs. Representatives from the District Associations come together into a national user association called Mental Health Society of Ghana.



Understanding Policy & Practice through Research

1. Mental Health Finance Study

In 2009, BasicNeeds carried out research studies to map mental health finances in Ghana, Uganda, India (Kerala state), Sri Lanka and Lao PDR. The research focused on funds available for mental health, how they are spent, and how that impacts mental health services in each of these countries. The studies were undertaken between January and July 2009.



2. Evaluating outcomes of Mental Health & Development

BasicNeeds and The University of Cape Town (UCT) have undertaken a collaborative study in Kenya to evaluate quality of life outcomes for Users who received interventions through BasicNeeds' Model for Mental Health and Development. The study findings will contribute to the ongoing work of BasicNeeds in other countries and settings, including integration into the programmes of other development agencies and governments. The first round of data collection was completed in 2009.



3. Participatory Data Analysis (PDA) in Lao PDR

PDA is a qualitative method of analysis where people living with mental illness or epilepsy (users) influence the research process through not only analyzing data collected by a researcher, but also simultaneously generating and analyzing new data as a group.

In 2009 four PDA sessions were organized by BasicNeeds in Xaythany district in Lao PDR. Ninety six users, carers and volunteers participated. Key findings from these PDAs are: a) MH services have improved; but the human resources and the psychotropic drugs are still limited. b) Many families with people with mental illness get support from those whose symptoms have



reduced. c) Villagers have a better understanding about the illness and allow Users to participate in all kinds of activities. The findings were shared with the district hospital, other NGOs, Ministry of health and the Vientiane Health department. PDA was found to be a useful method to keep track of the progress of Users as well as for seeking improvement in service delivery.

4. Gender study in Sri Lanka

A study titled 'Developing Gender Sensitive Indicators for Community Mental Health and Development Program in Sri Lanka's Southern Province' was conducted in 2009. The study developed a set of indicators to measure gender sensitive outcomes in relation to mental health and development which could be integrated into future BasicNeeds' programmes. These indicators can be used to assess outcomes of MHD programme in organizational policies and budgeting, participation, awareness on rights and gender roles, gender sensitivity in capacity building, government stakeholders' gender sensitivity in service provision, volunteerism and research. The findings also show that women are more likely to participate in programme related activities than men.



5. Research in Uganda

A research paper titled 'Factors that may Undermine Healing in the Long Term for the Survivors of Grief and Torture: A Case Study of Acowa Sub County, Amuria District' is being developed in BasicNeeds Uganda. Our Uganda team reports that a mental health skills audit was carried out among health workers in Amuria and Kaberamaido districts so that future training on mental health skills for health workers will be need based. A Self Advocacy Research Project was also launched in Masaka and Sembabule and the Programme Manager is developing a toolkit that will be used by Self Help Groups in other project areas or districts.



Monograph on Community Mental Health Practice



In 2009 BasicNeeds published a monograph titled 'Community Mental Health Practice: Seven Essential Features for Scaling Up in Low- and Middle-Income Countries'.

The monograph offers a comprehensive definition of Community Mental Health Practice and a list of essential features that are required if CMHP is to be scaled up effectively. The CMHP definition and the essential features for scale-up, presented at the beginning of this monograph, are developed from an analysis of case studies of CMH practice in seven different LMICs. An analysis of these case studies provides evidence of effective practice, as well as challenges.

"I was really impressed with your monograph. I believe that it addresses a number of issues which we are also struggling with in the NHS so I have sent a copy to our Chief exec and the Trust Executive Management Team". - Prof. Ian Robbins, Associate Director of Psychological Services, St. Clements's hospital, Suffolk, UK and BasicNeeds' Trustee.

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