

# GCC MENTAL HEALTH (EPILEPSY AND MATERNAL DEPRESSION) PROJECT

## Background and Objectives:

In Ghana, neuropsychiatric diseases which include epilepsy account for 8.8% of total daily activity life years (DALYs) lost. Epilepsy constitutes more than 10% of OPD cases in each of Ghana's three psychiatric hospitals. Epilepsy care in the country faces a lot of challenges and affected persons have been stigmatized and discriminated upon over the years.

Similarly, maternal depression prevalence in Ghana is known to be about 10%. Although studies have shown the adverse effects the condition has on maternal and child health outcomes, very little is being done about it.

In the light of these and other mental health related challenges, Ghana passed the Mental Health Act (846) in 2012 which is advocating for integrated healthcare in primary health facilities for mental health patients.

A pilot study in mental health using continuous quality improvement (CQI) methodology has been rolled out by the National Catholic Health Service (NCHS) working in partnership with Institute for Healthcare Improvement (IHI), USA and in collaboration with the Ghana Health Service and Queauji Consulting firm. This two-year project, launched in June 2014, is being funded by Grand Challenges Canada.

The specific aims of the project, with the use of standard continuous quality improvement (CQI) methodologies, are to:

- Identify 100 persons with epilepsy, reduce treatment gap and increase seizure free days for about 50 epileptics
- Identify 100 women with maternal depression with a targeted 50% achieving clinical response within 12 weeks
- Develop IT prototype tools and application to facilitate and accelerate CQI process.

## Scope of work:

An improvement collaborative network of Quality Improvement teams from seven [7] participating hospitals used five basic quality planning tools [including model for improvement, root cause analysis, PDSA and process maps] which determined the possible causes of low identification and attendance of epilepsy patients and maternally depressed mothers to the health facility. Among the communication channels used, the whatsapp platform has been the most preferred and has allowed the project to give quick feedback to teams. IT innovation component focuses on patient care, program management and use of quality improvement tools.

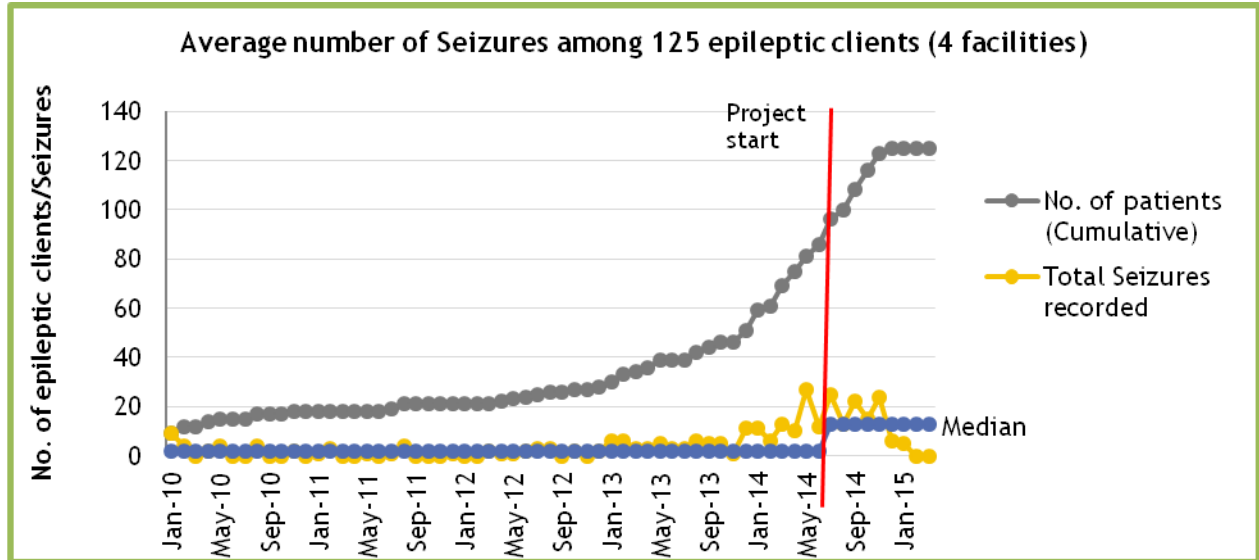
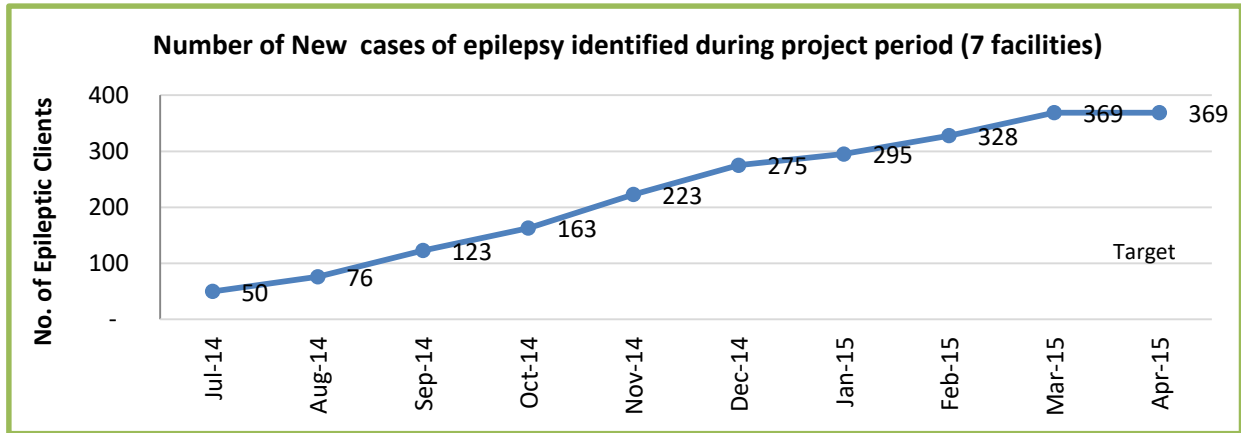
Interventions being tested have been context specific, based on what the root cause analysis showed.

- Sensitization of frontline workers on the conditions and the need to be on board to improve the quality of life of patients affected.
- Health education at the hospital and natural place of gathering within the community, churches/mosques and schools to sensitize community members about epilepsy and also reduce stigmatization and discrimination.
- Use of screening tools for patients at OPD for Epilepsy and of PHQ-9 for mothers at antenatal and post natal clinic for maternal depression.
- Engage leaders of prayer camps to sensitize them on importance of hospital care for epilepsy and maternal depression.
- Prescription of medicines on the national health insurance list.

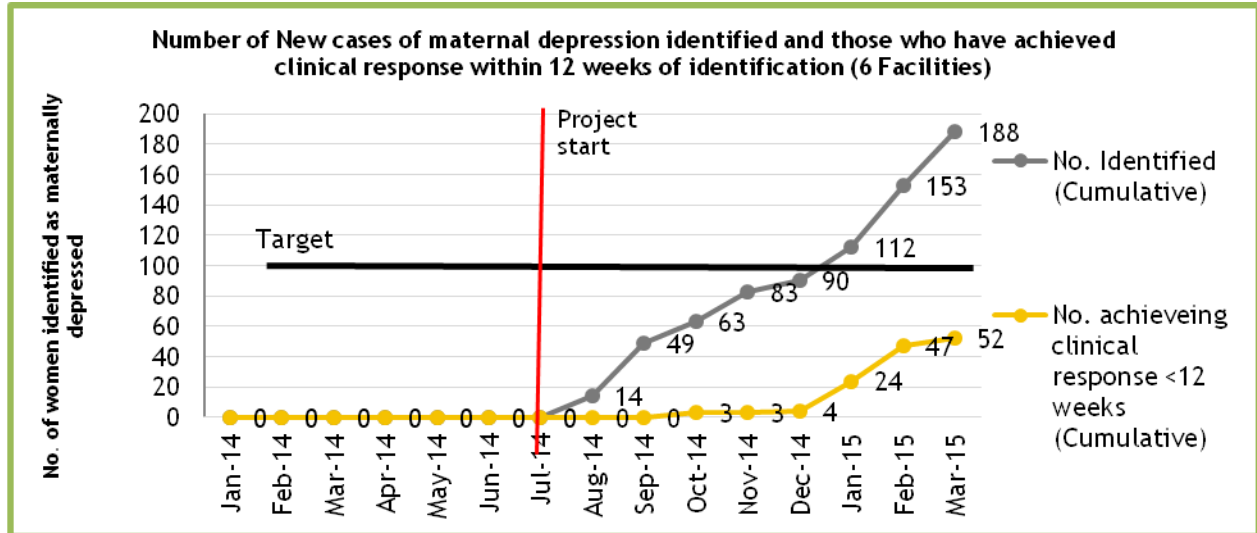
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- Use of district social welfare officers to support maternally depressed women by involving the male partners.
- Improving availability and accessibility of medication
- Follow-up on identified clients and use of medication compliance and seizure tracking chart.

### Results:



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### OPPORTUNITIES FOR SCALE UP

- *Highlights of new thinking or developments to advance innovation toward impact may include:*
  - *Active involvement of the Mental Health Authority (MHA)*
    - *To adopt our change package, e.g. integrating screening for maternal depression into ANC, to improve care for women with maternal depression.*
    - *Standardization of mental health treatment guidelines*
    - *Train (through Learning Sessions, Site visits, Improvement Coaches Training, etc.) regional or district mental health coordinators to do periodic visits to facilities to monitor and evaluate services being provided to clients who visit the mental health unit.*
    - *Use IT innovation to improve communication between health care providers and clients, etc.*
  - *Support from Ghana Health Service (GHS) Institutional Care*
    - *To showcase work during quarter and half year review.*
    - *Learn from process and outcome indicators from Ghana Fight Against Epilepsy, and build on them with learning from GCC mental health project.*
    - *Build a mental health data matrix to report key indicators for epilepsy and maternal depression.*
    - *Make available mental health services within a reasonable range, where services can easily be accessed.*