Proposal

Project title

Mental Health Literacy and Counselling Services (MENTHALICS)

Submitted by:

Total Life Enhancement Centre Ghana

To:

Global Giving

URL

Mental-health-and-counselling-services-for-1500+-Ghanaians

1.0 Project Summary

This project is geared towards educating youth on mental health and the need for counselling/support services. It will target 1000 students and 50 institutional guidance and counselling co-ordinators with the view to raising awareness on the mental health phenomenon as well as equip 500 health workers with mental health skills to appropriately manage mental health challenges in the Northern Region of Ghana.

2.0 Background

As the fourth developing city of Ghana, Tamale is fast growing in population and urbanising with attendant psychological issues, which have the potential to adversely affect productivity and self-development. The impact of population growth and urbanisation is beginning to reflect in several areas - for example, high substance abuse in Tamale, increased stress related challenges among students, and, increased alcohol and drug misuse within the general population among others. There are however insufficient awareness and support services available to the general population, resulting in little understanding of mental health related challenges. This has further resulted in stigma, discrimination and isolation of affected individuals by families and the general community. Comprehensive treatment for mental disorders is not accessible because they have not been prioritised by policy makers.

3.0 The Problem

Mental health is almost a neglected component of health care services in Ghana. The mental health treatment gap stands at 98% (Dixon, 2012). The training content of health professionals on mental health in the country is low (Roberts, Mogan, & Asare, 2014). Also prevalence of psychological distress is high among both men and women in Ghana (Sipsma, et al, 2013). This adversely affects the country's development as productivity is affected and there is strong association between psychological distress and unemployment, and among those working, psychological distress accounted for substantial amount of lost productivity (Canavan, et al, 2013). There are also limited funding opportunities, inadequate human resources and inadequate facilities to cater for mental health conditions (Dixon, 2012; Roberts, Mogan, & Asare, 2014). Notwithstanding this, mental health conditions remain on the increase and thus worsened by the inadequate human resources to properly identify and appropriately manage such conditions, particularly among the youth, our future leaders (Roberts, Mogan, & Asare, 2011).

This project is targeted at health workers and youth (students) of Tamale, the regional capital of the Northern Region with a population of about 1 million. **Total Life Enhancement Centre Ghana** has been implementing non-profit health related activities since 2018 with the greatest desire to increase

awareness of mental health conditions and offer support to health workers to be able to identify and manage these appropriately. It our desire to continue with our Mental Health awareness raising activities, scaling up to Senior High Schools and Health Facilities in the Northern Region to improve upon mental health literacy and encourage the use of the **BIO-PSYCHO-SOCIAL MODEL** of healthcare delivery by health workers in the region. This project will help to increase the mental health literacy levels among people and improve the availability and usability levels of mental health services.

4.0 Intervention Strategy

The project seeks to reverse the situation of mental health by raising awareness among students and providing psychological therapies (psychotherapy) and counselling services support. It will further provide family counselling services, arts and life skills to enable affected individuals live meaningful lives by developing themselves to contribute to national development.

The project will promote accessibility to mental health treatment particularly for the benefit of persons of lower socio-economic status. The project will contribute to improvement in mental health literacy among health workers and the youth for a productive generation. The capacity of counsellors in targeted institutions will be built on counselling services for mental health affected persons. The project will empower health workers to serve as link to enhance mental health availability and usability in the region for effective project implementation.

Summary

- ✓ Awareness creation among (1000) students.
- ✓ Provision of counselling and psychotherapy services and interventions -1000 students.
- ✓ Empowering institutional (50) counsellors for project relevance.
- \checkmark Equipping 500+ health workers to provide mental health services.

5.0 Long-Term Impact

Project aims to carry out preventive work by raising awareness of mental disorders in Senior High Schools, promoting healthy and stress-free living and improving upon the mental health literacy level of health workers and the youth. We want to institute psychological/mental health CLUBS in schools for effective discussion and management of emotional trauma issues as well as raise mental health awareness & minimise stigma while improving acceptability levels by families and community members.

Specifically, this project anticipates achieving the following:

- ✓ 1000 students will be well informed about Psychological/mental health issues.
- ✓ 1000 students will acquire skills to help them live meaningful lives by appropriately handling their psychological, mental and emotional challenges.
- ✓ There will be improvement in the general health of projects participants, that is less visit to health facilities.

- ✓ There will be improvement in students' academic performance
- ✓ Students' self-esteem and assertiveness skills will be enhanced.
- ✓ 50 institutional counsellors will be equipped/trained with counselling and mental health skills to assist students.
- ✓ Improvement in mental health literacy among projects participants
- ✓ Equipped 500 health workers with mental health skills for effective mental health services delivery.

6.0 Additional Documentation

Project proposals, project budgets, program materials, and business plans.

7.0 Primary Photo and Photo Gallery



Seminar for health workers - BIOPSYCHOSOCIAL MODEL OF HEALTH DELIVERY



Planning at the office (TOLEC GH)



Peer counsellor Training for nurses trainees



Mental health advocacy at the nurse training college (EMOTIONAL MANAGEMENT)

8.0 Web Resources

- 2) Source: GNA Story (https://ghananewsagency.org/health/tamale-remand-prisoners-to-receive-therapy-services-154922) Published: 2019-08-20 17:15:58 © Ghana News Agency
- 3) <u>https://mobile.ghanaweb.com/GhanaHomePage/NewsArchive/Commit-equal-resources-to-</u> mental-health-care-clinical-psychologist-774769
- https://allghananews.com/commit-equal-resources-to-mental-health-care-clinicalpsychologist/
- 5) http://ghananewsagency.org/social/ngo-educates-pupils-on-drug-abuse-in-tamale-15692

<u>9.0 BUDGET</u>

ACTIVITIES	TOTAL COST IN CEDIS	TOTAL COST IN
		DOLLARS
Salary/allowance for 2	2000.00 x 12 x 2= 48,000.00	8,839.80
psychologists		
Salary/allowance for 1	1850.00 x12 x1 = 18500.00	3407.00
Counsellor		
Cost of travels to 5 schools	3,450.00	635.36
(3 days a week) =1000		
students		
Administrative cost/office	4,560.00	839.78
running cost (12 months)		
Seminar for health workers	6580.00	1,211.79
on mental health		
(BIOPSYCHOSOCIAL(s)		
MODEL OF HEALTH		
DELIVERY) – 3 DAYS		
EVENT – 150 x 3=450		
+50=500 PARTICIPANTS		
2 days institutional	4750.00	874.77
counsellors training for		
CONTINUTIY or		
PROJECT sustainability)-50		
Grand total	81,280.00	15,808.68

10.0 Donation Options

- \checkmark \$50 will provide 2 sessions of counselling per student for 1000 students
- \checkmark \$30 will provide 1 health worker training materials for 500
- \checkmark \$25 will provide training for 1 institutional counsellor for 50 counsellors.
- ✓ \$10 will provide office stationaries per week for 52 weeks
- ✓ \$15 will provide fuel for office running for 52 weeks

11.0 References

- Canavan, M. E., Sipsma, H. L., Adhvaryu, A., Ofori-Atta, A., Jack, H., Udry, C., ... & Bradley,
 E. H. (2013). Psychological distress in Ghana: associations with employment and lost productivity. *International Journal of Mental Health Systems*, 7(1), 9.
- Dixon, J. (2012). Improving the mental health treatment gap in Ghana.
- Fournier, O. A. (2011). The status of mental health care in Ghana, West Africa and signs of progress in the greater Accra region. *Berkeley Undergraduate Journal*, 24(3).
- Roberts, M., Mogan, C., & Asare, J. B. (2014). An overview of Ghana's mental health system: results from an assessment using the World Health Organization's Assessment Instrument for Mental Health Systems (WHO-AIMS). *International journal of mental health systems*, 8(1), 16.
- Sipsma, H., Ofori-Atta, A., Canavan, M., Osei-Akoto, I., Udry, C., & Bradley, E. H. (2013). Poor mental health in Ghana: who is at risk?. *BMC public health*, *13*(1), 288.