

WHO SPECIAL INITIATIVE FOR MENTAL HEALTH



NEPAL

- Mental illness accounts for 18% of all non-communicable diseases in Nepal
- Less than 3% of the national budget is allocated to the health sector, with only 1% of that budget dedicated to mental health
- 0.27 nurses, 0.13 psychiatrists, and 0.02 psychologists per 100,000 people
- There are 18 outpatient mental health facilities available, but none of these include care for children or adolescents

STRENGTHS

- Training and curricula have been developed for mental health workers
- The Department of Health Services established a Non-Communicable Diseases and Mental Health Section within Nepal's division of Epidemiology and Disease Control
- Community Mental Health Care Packages have been created to integrate mental health care into primary health care
- Six more medications have been added to Nepal's list of medicines essential for the treatment of mental health conditions

CHALLENGES

- Budget allocation is low
- Programmes dedicated to de-stigmatisation have yet to be developed
- The lack of skilled human resources in this sector has not been addressed and resources are mostly centred in the capital
- Services have not been established at community levels
- Lack of preventative care
- Training opportunities for mental health, and systems for the regulation and accreditation of service providers is lacking

NEPAL'S DESIGN PROCESS

1

Multi-stakeholder face-to-face meeting in Kathmandu held in April 2021. The meeting included representatives from relevant NGOs, the Ministry of Health and Population (MOHP), education and social sectors, civil society representatives, and individuals with lived experiences.

2

A logical framework (logframe) was drafted and reviewed via email by stakeholders who were both in the design meeting and others who could not be part of the face-to-face workshop.

3

Online meeting to discuss and rate priorities of activities, which contributed to refining and consolidation of the logframe.

4

Ministry of Health and Population (MOHP) sign off on the logframe and WHO Special Initiative for Mental Health plan in Nepal, which is complementary to Nepal's plans under their National Mental Health Strategy and Action Plan 2020.

NEPAL'S LOGICAL FRAMEWORK FOR PLANNED WORK UNDER THE WHO SPECIAL INITIATIVE FOR MENTAL HEALTH

OUTCOMES AND OUTPUTS

- 1** Governance structures, policies and legislation support actions that optimise access to mental health services and ensure the rights of persons living with mental health conditions and psychosocial disabilities
- Appropriate laws, policies and strategies formulated and implemented
 - Central, provincial and local governments implement Nepal's National Mental Health Strategy and Action Plan 2020
 - Progress towards national and international human rights commitments demonstrated

- 2** Financial systems facilitate the delivery of affordable, accessible and quality mental health services for all population groups
- Government led financial allocations framework developed

- 3** An expanded mental health workforce is equitably distributed to national, provincial and local levels of healthcare and are equipped and supported to provide quality and rights-based services
- A Nepal mental health human resources strategy developed and implemented
 - The medical education curricula for different health cadres is reviewed and updated and new academic programs expanded
 - Increase access to mental health services via task sharing

- 4** Quality mental health interventions are scaled-up and are accessible to people of all ages and with particular vulnerabilities
- Mental health services for each level of health care defined and minimum standards applied
 - Referral care is available
 - The supervised use of mhGAP tools and brief psychological interventions implemented
 - Pharmaceutical products and supply chain systems strengthened
 - Community mental health and psychosocial support programmes initiated and scaled up
 - Mental health is integrated within other priority areas (communicable and non-communicable diseases, public health and social protection programs)

- 5** Routine Information management and evidence informs policies and practice for mental health and psychosocial interventions
- Mental health indicators are integrated into general health management information system (HMIS)
 - An implementation research agenda developed

OUTCOME-LEVEL INDICATORS

- Mental health laws, policies and strategies exist and are implemented/enforced
- # federal, provincial and local governments with functional mental health divisions /units /focal persons
- Persons/Groups with lived experiences of mental health conditions report satisfactory involvement in design and evaluation of laws, policies, plans and services
- Increased compliance with human rights standards in mental health services

- % of National Mental Health Strategy and Action Plan funded through government funds at national and subnational levels
- % increase in government funding towards mental health
- Financial allocation to mental health system supports monitoring for rights compliance, is proportionate to disease burden and/or needs of different patient groups and predominantly supports cost-effective interventions
- % of total mental health budget spent to decentralised services

- % increase in population coverage by decentralised mental health workforce is demonstrated
- % active mental health workers who meet competency standards for mental health service provision

- % increase in treatment coverage for quality mental health services
- % increase in access to quality mental health services

- Mental health data from the Health Information System is demonstrated to inform service improvement
- Research studies are demonstrated to inform service improvement