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# Evaluating the Implementation and Challenges of the Mental Health Program at Regional Directorate of Health Services (RDHS) Gampaha District of Sri Lanka

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#### ABSTRACT

Mental health is a vital component for the overall well-being of individuals, yet it often receives low priority in many developing countries due to social stigma, negative attitudes and poor resources. In Sri Lanka, the situation is improving with the implementation of a national mental health policy aimed at providing comprehensive community-based services. This study focuses on the mental health program implemented by the Regional Directorate of Health Services (RDHS) in Gampaha district. Through key informant interviews and observational visits, this research evaluates the current processes, identifies challenges, and provides recommendations for enhancing mental health promotive services. Despite significant achievements, the program faces obstacles such as insufficient resources, lack of trained staff, and inadequate facilities. Recommendations include increasing staff, improving facilities, ensuring reliable transportation, and enhancing stakeholder collaboration to sustain and enhance mental health services in Gampaha.

Key words: Mental health, Gampaha district, Community mental health services

# Introduction

Mental health is recognized as a fundamental aspect of health, as declared by the World Health Organization (WHO) in its constitution: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". This statement underscores the importance of mental health as one of the three major pillars of complete health. Mental health encompasses more than just the absence of mental illness; it is defined as a state of well-being in which individuals realize their abilities, can cope with the normal stresses of life, work productively, and contribute to their community (1).

The Ministry of Health in Sri Lanka has formulated a mental health policy to provide

comprehensive mental health services based at the community level. This policy promotes mental health well-being and aims to improve services for the prevention, treatment, and rehabilitation of persons with mental problems or disorders (2). The responsibility for mental health has been devolved to provincial health directorates, which have established mental health units in each district. There are currently 24 focal points for mental health across Sri Lanka, one of which is located in Gampaha (3).

The mental health unit at RDHS Gampaha is tasked with implementing programs to achieve the objectives of the national mental health policy at the district level. This includes overseeing preventive, curative, and rehabilitation programs to ensure comprehensive mental health care for the community.

## **Objectives**

- To examine the current processes implemented by the mental health unit of the Gampaha District in Sri Lanka.
- . To provide recommendations to further improve the activities of the mental health unit in the Gampaha District.

#### **Literature Review**

The WHO has emphasized that mental health care should be integrated into general health services and community settings, replacing large, centralized psychiatric institutions with more appropriate mental health services (1). In Sri Lanka, the decentralization of mental health services has led to the establishment of mental health units in each district, aiming to provide community-based care (4).

Previous studies highlight the importance of early intervention and community support in improving mental health outcomes. For instance, a study on the mental health response following the Easter Sunday attacks in Sri Lanka emphasized the need for early phase interventions in child and adolescent psychiatry (5). Additionally, research on peer violence among adolescents in Gampaha district schools revealed the significant impact of mental health issues on youth and the importance of addressing these problems within the community (6).

#### Methodology

The study utilized qualitative research

#### They are:

- Key informant interviews with the RDHS, Deputy RDHS, Medical Officer Mental Health Focal Point, and staff attached to mental health units.
- Observation visits to mental health units at institutions and rehabilitation centers in the Gampaha district

## **Situation Analysis**

The mental health facilities available in Gampaha district include:

Curative Services: Hospitals with consultant psychiatrists providing curative services, such as District General Hospital (D.G.H.) Gampaha, Base Hospital (B.H.) Wathupitiwala ,Teaching Hospital (T.H). Ragama, D.G.H. Negombo (under the central Ministry of Health), and Divisional Hospital (D.H) Kandana, which serves as a long-stay unit for mental health patients.

Community Support Centers: Six centers established at Community Service Centre (CSC)-Kalagedihena, Medical Officer of Health (MOH Ragama), MOH Minuwangoda, MOH Dompe, MOH Meerigama, and MOH Divulapitiya.

Rehabilitation Center: The "Shelter of Hope" at B.H. Minuwangoda, providing treatment and vocational training for mental health patients.

Psychiatric Clinics: Located at B.H. Kiribathgoda, B.H. Minuwangoda, CNTH Ragama, D.G.H. Gampaha, D.G.H. Negombo, B.H. Wathupitiwala, D.H. Divulapitiya, D.H. Dompe, and Wijaya kumarathunga Hospital Seeduwa. Psychiatry outreach clinics also function at D.H. Pamunugama, D.H. Radawana, and D.H. Akaragama.

Home Visits: Conducted by the focal point with support from nearby mental health centers or hospitals, providing comprehensive care at the community level.

The "Shelter of Hope" rehabilitation center at B.H. Minuwangoda is a 20-bed facility providing consultant services, counseling, and occupational therapy. Patients receive training in horticulture, carpentry, shoemaking, and other vocations, with some rehabilitated patients employed in Board of Investments (BOI) affiliated institutions. Another facility, "Nawadiganthya" in Urapola, offers drug addiction treatment and rehabilitation under the Ministry of Defense, with medical support facilitated by the Gampaha RDHS focal point.

The focal point also operates a call center, accessible by dialing 1926, providing information and directing calls to appropriate mental health services. Additionally, training programs are conducted for medical officers, BOI personnel, school communities, and other stakeholders, focusing on the identification, management, and prevention of mental health issues (5).

## Identified Problems

- Insufficient resource availability to function as an effective focal point.
- Insufficient number of trained medical officers appointed to the focal point.
- Lack of a permanent consultant psychiatrist.
- Non-availability of sufficient supportive staff, including nurses.
- Safety and security concerns for staff during home visits.
- Regular breakdown of the vehicle provided to the focal point.
- Potential closure of the "Shelter of Hope" due to space reallocation.
- Stakeholder differences preventing reintegration and empowerment of mental health patients.
- Unsustainable job placement system for rehabilitated mental health patients.
- Insufficient drug supply.
- Inadequate space for smooth functioning of the focal point.
- Lack of educational materials on mental health issues.

- Inadequate communication and collaboration with concerned departments, such as the Department of Social Services.
- These issues were prioritized based on criteria including the magnitude of the problem, importance, and feasibility of solutions. The primary issue
  identified was the insufficient resource availability to function as an effective focal point.

#### Discussion

The focal point on mental health at RDHS Gampaha has conducted numerous commendable activities despite severe resource constraints (7). The services provided through clinics, centers, and home visits have significantly contributed to the well-being of mental health patients in the district. The dedicated medical officer, experienced in prevention, treatment, and rehabilitation, has been instrumental in uplifting the services. However, the recent transfer of this officer poses a risk to the continuity of services. The new officer lacks training and experience in mental health and is expected to go abroad, potentially curtailing the program's effectiveness.

To enhance the program, the focal point needs the services of a consultant psychiatrist and experienced medical officers on a permanent basis. Additionally, the appointment of nursing officers with experience in mental health is crucial for conducting efficient outreach programs and home visits. Staff safety during home visits is another critical issue, as some mental patients exhibit violent behavior, posing risks to visiting staff (6). Reliable transportation is also necessary, as the current vehicle frequently breaks down, hindering operations.

The focal point currently occupies a small area in the RDHS building, insufficient for smooth functioning. More space and organized educational materials are needed to provide better service. Furthermore, the required medicines for home visits are obtained from the General Hospital Gampaha or nearby hospitals, and there is no permanent staff attached to the focal point. The medical officer must rely on medical officers and nurses from nearby hospitals for home visits, complicating operations (8).

The "Shelter of Hope," the only hospital-based drug rehabilitation center in Sri Lanka, faces threats of closure due to space reallocation. This center provides valuable vocational training and employment opportunities for rehabilitated patients. However, the sustainability of this employment system is at risk with the transfer of the former medical officer, as no strategy has been formulated to continue the scheme.

Stakeholder differences, particularly with the Department of Social Services, also pose challenges. Inadequate communication between stakeholders hinders collaboration, affecting the overall effectiveness of the program (5).

#### Conclusion

The mental health program at RDHS Gampaha requires strategic enhancements to continue serving the public effectively. Addressing resource shortages, improving facilities, ensuring reliable transportation, enhancing staff safety, and fostering better stakeholder collaboration are essential steps to sustain and enhance mental health services in Gampaha.

# Recommendations

- Increase staff, including consultant psychiatrists, trained medical officers, and nurses, to ensure comprehensive care.
- Allocate more space and organize IEC materials for the mental health unit to improve service delivery.
- Provide a reliable vehicle for outreach programs and home visits to ensure uninterrupted service.
- · Implement measures to ensure the safety and security of staff during home visits, including prior notification to patient families.
- Improve coordination with stakeholders, including the Department of Social Services and BOI, to enhance collaboration and service integration.
- Strengthen the operations and resource allocation for the "Shelter of Hope" to ensure its effective functioning.
- Establish a sustainable system to provide employment for rehabilitated youths.

#### References

- World Health Organization (2003) 'Mental Health Policy and Service Guidance Package: Organization of services for Mental Health', Mental Health Policy and Service Guidance Package, pp. 1–76. Available at: <a href="http://www.who.int/mental\_health/policy/services/4\_organisation-services-web-8-07.pdf">http://www.who.int/mental\_health/policy/services/4\_organisation-services-web-8-07.pdf</a>.
- 2. .Suveendran T, Fernando N, de Silva C. Decentralizing provision of mental health care in Sri Lanka. WHO South-East Asia Journal of Public Health. 2017;6(1):18.
- 3. The Asia Foundation (2004) Transitions in Mental Health and Psychosocial Support Services in Sri Lanka A Decade in Review.

- 4. 2.Hechanova R, Waelde L. The influence of culture on disaster mental health and psychosocial support interventions in Southeast Asia. Mental Health, Religion & Culture. 2017 Jan 2;20(1):31–44.
- Chandradasa, M. et al. (2020) 'Early phase child and adolescent psychiatry response after mass trauma: Lessons learned from the Easter Sunday attack in Sri Lanka', International Journal of Social Psychiatry, 66(4), pp. 331–334. doi: 10.1177/0020764020913314.
- Wijeratne, M. P. et al. (2014) 'Correlates of peer violence among 13- to 15-year-olds in Gampaha district schools in Sri Lanka: Findings from a comparison between violent and non-violent adolescents', SAGE Open, 4(3), pp. 1–14. doi: 10.1177/2158244014550616.
- C.Hsiao, W. and K.T.Li (2000) 'A Preliminary Assessment of Sri Lanka's Health sector and step towards', In conjunction with Institute of Policy Studies Health Policy Programme Sri Lanka.
- 8. Nyström ME, Karltun J, Keller C, Andersson Gäre B. Collaborative and partnership research for improvement of health and social services: researcher's experiences from 20 projects. Health Research Policy and Systems. 2018 May 30;16(1).