



Key Programme Achievements 2020-2024

Ghana Somubi Dwumadie (Ghana Participation Programme) is a four-year disability programme in Ghana, with a specific focus on mental health. This programme is funded with UK Aid from the UK government. The programme was run by an Options' led consortium, which also consists of BasicNeeds-Ghana, Kings College London, Sightsavers and Tropical Health, and focused on four key areas:

Promoting stronger policies and systems that respect the rights of people with disabilities, including people with mental health disabilities

Scaling up high quality and accessible mental health services

Reducing stigma and discrimination against people with disabilities, including mental health disabilities

Generating evidence to **inform policy and practice** on the effectiveness of disability and mental health programmes and interventions

Our ways of working

We delivered the programme using good practice user-led approaches, while being adaptive and pragmatic to the local context. Key components of our approach focused on:

- Collaboration between different government ministries and departments, at both national and subnational levels, as well as among multilateral and international organisations, civil society, user-led organisations working in the mental health and disability space, and traditional and religious leaders
- Delivering technical assistance to strengthen and build capabilities of government and civil society
- Increased involvement of people with disabilities including people with mental health conditions to shape services, feed into implementation plans and drive accountability
- Inclusive approaches with a focus on gender
- **Generating context-specific evidence,** to support learning, adaption, service design and delivery

Achievements in numbers

155,536 people

directly reached with activities that engage, empower, and improve the wellbeing, social and economic outcomes, and rights of people with disabilities and mental health conditions in Ghana between January 2020 and September 2024. This includes, among others



27,735 people reached through self-help groups



423 healthcare workers trained



261 metropolitan, municipal, and district assemblies have mainstreamed disability activities into their workplans and regional and district development planning officers have had their capacity built on progress reporting the implementation of the 2022 Disability Commitments



21 grants awarded across three grants rounds for COVID-19 Psychosocial Resilience and Support, Evidence and Effectiveness grants, and finally our Legacy and Sustainability grants round



16 roadshows explaining the new District Assembly Common Fund guidelines and the Disability Commitments made by government of Ghana



14 research papers written and 9 already published in academic journals



3 district demonstration sites for the district mental healthcare plans

Promoting stronger policies and systems

The programme aimed to ensure that the government had the best information and knowledge to be able to efficiently deliver services, identify priority needs and develop informed policies. This included providing support to both government agencies and civil society.

Collaboration was an integral approach for delivering this work. We set up a Programme Advisory Group which included people with disabilities and mental health conditions representing practitioners, lawyers and the media, to guide consultations and aid engagement.

Key achievements



Piloting a Mental Health Review Tribunal to independently adjudicate over mental health treatment

The programme provided technical assistance to set up a <u>Mental Health Review</u> <u>Tribunal</u> in line with the Mental Health Act 2012. This is a quasi-judicial body to ensure that peoples' rights - particularly rights to liberty and to refuse treatment - are protected.

We provided training to directors of the Mental Health Authority, psychiatric hospital directors, and members of the Review Tribunal. We supported initial Review Tribunal hearings and visited psychiatric and teaching hospitals to review challenges and barriers in implementation.

Most recently we supported a stakeholder meeting which planned the future implementation and scale-up of the Review Tribunal, under the leadership of the Mental Health Authority.

Working alongside the Mental Health Authority, we also provided significant technical assistance to the Regional Mental Health Visiting Committees, a structure that is detailed in the 2012 Mental Health Act, but had faced challenges in becoming operational. Delivering training with our partners, we equipped Visiting Committee members with the knowledge and confidence to carry out their mandates around inspecting the quality of mental healthcare in line with the Mental Health Act.

The training, delivered in five out of 16 regions in Ghana, sought to uphold the standards set out in the United Nations Convention on the Rights of Persons with Disabilities and the guidance offered by the World Health Organization's Quality Rights toolkit to ensure the highest attainable standard of health, adapted to the context in Ghana. We supported one Visiting Committee to run as a trial and from 2023, the Mental Health Authority has fully taken over responsibility for the running of the Visiting Committees.

"The facilitator explained very well the role and responsibilities of each of the members and how we can work together as a committee: we are ready to go!"

Visiting Committee member



Working with the government to make Sustainable Development Goals commitments a reality

We worked with the Ministry of Gender, Children and Social Protection to develop an action plan on how to put the vision of the **2022 Disability Commitments** into action. We also produced an **advocacy toolkit** to support others to lobby for the commitments to be implemented.

Towards the end of the programme, we trained 261 regional and district development planning officers to ensure they capture and reflect mental health and disability indicators in their annual workplans. We also worked with the National Development Planning Commission to set up a system for tracking delivery against the Disability Commitments. The National Development Planning Commission also led a roundtable discussion to encourage a range of stakeholders to start developing disability and mental health indicators for Medium Term Development Plans.



Strengthening civil society

Civil society organisations, including self-help groups and disabled peoples' organisations, are a key source of support and empowerment for people with disabilities. We provided a broad range of technical assistance and training for these groups, ensuring they will continue to deliver strategically, sustainably and effectively now and in the future.

Working with two umbrella civil society organisations, Ghana Federation of Disability Organisations and the Mental Health Society of Ghana, we agreed demand-led technical assistance plans that would strengthen these organisations, such as creating new strategic and advocacy plans, training regional leaders on how to lead and on conflict management.

Training topics over the duration of the programme included: governance, leadership, mental health and psychosocial support, advocacy, accessibility, community health, and involved both leaders, volunteers, and marginalised groups.

In the last few months of the programme, we have been supporting Ghana Federation of Disability Organisations to update their strategic plan, which has been validated after a series of participatory processes.

Another piece of important work was ensuring that disabled people could access polling stations and other elements of the electoral process, led by Ghana Federation of Disability Organisations. The ensuing report has been presented to the Electoral Commission and civil society are advocating for reform before the December 2024 elections.

Busy government officials don't have time to meet with all their constituents and people need to learn the necessary skills to identify opportunities and formulate agendas to present to policy makers. We hosted <u>interface</u> meetings between self help group representatives and local government, and we provided training and support for self help group members to prepare for these meetings to have their needs and priorities heard and understood by those who can make improvements to their lives.

'As a political head, I will approve applications of people with mental health conditions that the Fund Management Committee recommend to me without hesitation. We are here to serve the people and we must serve the vulnerable, including people with mental health conditions.'

District Chief Executive, North East Region

Scaling up high quality and accessible mental health services

Our research found that between 85-98 percent of people experiencing mental health conditions in Ghana cannot access the treatment they need due to the lack of service provision, lack of trained mental health professionals, inaccessible services and the stigma surrounding mental health. Our vision was for health services that were planned and implemented with better integration of mental health diagnosis and treatment and that would be more accessible for all.

'One thing that worked for us that we can build upon has to do with collaboration that we enjoy with other stakeholders. Looking at the issue of mental health, it requires other stakeholders to put their resources and expertise together. Here, we are talking about the various stakeholders like the health directorate, the assembly, the various institutions such as the NCCE [National Commission for Civic Education], even the media, putting all these together, and the various efforts from them. This can give us a very good lesson, and an output that we can build upon to help address our mental health issues in the district'

Anloga district operations team member

Key achievements



Promoting accessibility for all

We promoted the Ghana Accessibility Standards and undertook accessibility audits with Ghana Federation of Disability Organisations. We also developed an advocacy toolkit for campaigning for greater accessibility. As part of this we produced a documentary featuring the views of people with disabilities on the implementation of the Ghana Accessibility Standard for Built Environment and Government Agenda 111 programme



Formalising planning of district resources for mental health care

We identified the need for <u>District Mental Health Care</u> Plans that would coordinate resources for mental health care at a district level using the existing multi-disciplinary structures defined in the Mental Health Act. We worked in pilot districts to map an integrated approach to the detection, treatment, and management of mental health conditions. We piloted and assessed the use of these plans in three districts. All pilot districts have an approved mental health care and ongoing supervision plan and have reported monthly mental health service utilisation data and conducted relevant training. As a result, mental health services and treatment are now part of primary health care.

We held a national-level stakeholder meeting which brought together people who delivered on these health care plans and government services. We worked with the Ministry of Health and the Mental Health Authority to create a plan for rolling out the District Mental Health Care Plans across all of Ghana. To help make this happen, we have also produced a short advocacy tool which will help districts get national and regional buy-in to scale up this district planning model.



Making social welfare more accessible

We conducted a review and analysis of the 2010 guidelines for the management and disbursements of the District Assembly Common Fund for persons with disabilities, and found challenges in how these funds are dispersed, as well the exclusion of people with mental health conditions. Working with the Ministry of Gender, Children and Social Protection and Ghana Federation of Disability Organisations we revised the 2010 operational guidelines and undertook 16 regional sensitisation roadshows to secure buy-in for the new revised guidelines.

District social welfare officers in all 16 regions have been trained in the new guidelines on how to apply standardised criteria and beneficiary assessments. We hope that the revised guidelines will be signed off and funds will be dispersed to regions in time to expedite livelihoods improvements for people with disabilities and mental health conditions.



Training volunteers to support health delivery

We offered a variety of support for three types of volunteers:

- Community Health Volunteers: These volunteers are managed by the Ghana Health Service and we supported them to deliver on the District Mental Health Plans.
- **Community Volunteers:** Volunteers organised and trained with our partners to provide mental health and psychosocial support to people in the community.
- Inclusion Ambassadors and Disability Champions: organised by our grantees who selected and appointed community members to take roles that support stigma reduction, education, advocacy and influencing, as well as reporting abuse.

Reducing stigma and discrimination

Lack of awareness, education and general misunderstanding about mental health and disability leads to inappropriate treatment in society, poor health care and a denial of a person's right to a full life. It is difficult to change the lives of people with disabilities or mental health conditions if stigma and discrimination persist.

We conducted an **early study to detail the context of stigma** and drivers of disability and mental health stigma and put media engagement, advocacy and social behaviour change at the heart of our work. We funded and worked with grantees who are best placed to deliver this work. The work was also sensitive to the additional needs of women, older people, people with access needs, for example visually impaired or Deaf people, and includes outcomes that will outlast the programme, such as new positive sign language terms for mental health conditions; and co-created local language guides for disability.

'My family no longer lock me up in the room. At least the doors are opened for me to move outside. Children have put a stop to the ill treatment they sometimes give me. They now greet me and talk to me nicely; I have been asked if I would like to learn a trade which I agreed to. I hope this change in attitude is happening in other houses. I thank you guys for bringing this project into our community. I have always been a sad person, crying and wishing dead for myself, but now I have seen a new birth in my family.'

Woman with disability

Key achievements



No one left behind in an emergency

In 2020, we awarded seven small fast-track grants that supported resilience in people with disabilities including people with mental health conditions, COVID-19 survivors and healthcare workers. This helped people with disabilities and health care workers maintain their livelihoods during the pandemic and access appropriate healthcare and mental health support.



Tackling stigma and discrimination

In 2021, we awarded grants that focused on evidence and effectiveness in advocacy and reducing stigma and discrimination against people with disabilities, including people with mental health conditions, through behaviour change activities.

Evaluations of these grants have found: increased levels of confidence amongst persons with disabilities; improved access to healthcare; greater access to justice and enforcement of rights; improved use of positive disability terminology in communities; a reduction in the level of stigma and discrimination experienced by persons with disabilities; greater inclusion of persons with mental health conditions; and increased public awareness about mental health and disability and resulting positive societal changes; improvement in disabled people's involvement in decision-making at family and community levels; the enactment of sanctions and by-laws to promote positive language and reduce abuse and stigma.



Language matters

We funded work to collate positive disability terminologies, which went through a validation process, including sharing them with local language experts and traditional and religious leaders, for their feedback and input. **Positive language guides** were then produced and adopted in ten local languages. Those same leaders can now lead on the use of that new language in everyday life and help reduce stigma.



Using film to convene critical conversations

We worked with our grantees to make **films on significant changes** that took place through their activities. We hosted a screening of these films at the British High Commissioner's residence for World Mental Health Day, with additional screenings including in Northern Ghana. People featured in the films attended the screenings and discussions were held following screenings to bring key learnings to life and connect attendees with policy and decision makers, traditional chiefs, chief imam's representatives, funders, the CEO of the Mental Health Authority, academics and doctors, and representatives from multilaterals such as the UN.



Ensuring sustainability

Legacy grantees who worked on addressing stigma, through behaviour change and advocacy were also given specific training on monitoring and evaluation and governance to help them continue their work beyond the duration of the grant. Training on how to make change happen equipped them with further advocacy skills and we facilitated peer-sharing with previous grantees on lessons learned from engaging with traditional leaders.

Generating evidence to inform policy and practice

Improved information and data are essential to address healthcare and social care disparities and influence positive behaviour change. **The programme has produced and disseminated a range of studies** to build the evidence base necessary to support change. We have also made efforts to ensure that, as far as possible, evidence is generated by and with people with disabilities or mental health conditions.

Research included

- formal primary research
- · desk reviews of existing information
- story collection and
- grantee-led research

'For long, community leaders have been unaware about such issues but the project has created the opportunity for us to be exposed to a lot of issues which can be collectively fought for and achieved at the local level to support Deaf people with mental health conditions'

District Assembly member, Upper West Region

Key achievements



Improving policy and practice

Our research is used by various departments of the Ghanaian government and commonly referenced evidence includes:

- the work produced as part of the District Mental Healthcare Plan Framework, used for government mental health policy and planning;
- the Evidence-based Review of the DACF Disability Fund Disbursement and Management Guidelines report, used for policy and advocacy work.

We also found evidence that the grantee-led study into gender dynamics of witchcraft accusations was also used by a range of stakeholders. As a result of this work, the calls for legislation to protect women from false accusations have led to the passage of a Bill, which awaits presidential assent as a final action.



Making an investment case for mental health

We developed an investment case for mental health with the Mental Health Authority and partners. This has been widely used by government stakeholders and civil society organisations for information and advocacy purposes and cited by the media. Critical action identified by the investment case, such as the establishment of the Review Tribunal, have been adopted, and plans are in development to include mental health under the National Health Insurance Scheme; another critical action.

The Mental Health Authority subsequently developed a costing of mental health services and used this as a basis for engagement with the National Health Insurance Authority. The mental health benefits package has been through all the stages of National Health Insurance Authority review and we anticipate that this will be announced as part of the National Health Insurance Scheme, around the time the programme completes.



Improving access to psychotropic medicines

In partnership with the Mental Health Authority, we held a series of stakeholder discussions and workshops on access to psychotropic medicines and supply challenges, and developed recommendations to tackle them. We found that integration of psychotropic medicines into the general health system monitoring, evaluation, forecasting, and quantification tools is needed. Several steps have now been taken by the Mental Health Authority towards improving access.



Use beyond the programme

Key research is supported by strategic dissemination plans which will ensure that the research goes beyond the area studied and can be built on by future communities. Research has also gone on to receive peer review and be published in the scientific community or presented at international conferences.



Conducted, published and disseminated a number of important studies, including:

- Mental health and disability research priorities and capacity needs in Ghana: findings from a rapid review and research priority ranking survey, which was published in the Global Health Action Journal. A policy brief was also developed
- Mental health and disability research in Ghana: a rapid review, Pan African Medical Journal
- Towards implementation of context-specific integrated district mental healthcare plans: A situation analysis of mental health services in five districts in Ghana in Plos one
- Prevalence of probable mental, neurological and substance use conditions and case detection at primary healthcare facilities across three districts in Ghana: findings from a cross-sectional health facility survey in BMC psychiatry
- Development and implementation of mental healthcare plans in three districts in Ghana: a mixed-method process evaluation using Theory of Change, in Community Mental Health Journal
- Prevalence of Depression, Quality of Life and Gender Dynamics of Women Accused
 of Witchcraft in Northern and North East Regions of Ghana, by grantee Songtaba in
 Health and Social Care in the Community. A policy brief is also available
- Assessing Barriers to Mental Healthcare Interventions for Deaf People in Ghana, by our grantee, the Ghana National Association of the Deaf (GNAD) in Journal of Biosciences and Medicines. A policy brief is also available
- Double Tragedy: Examining the Effects of Mental Health Stigma on Help Seeking Behaviour among Deaf People in Ghana, by GNAD in Open Journal of Psychiatry
- User-led approaches in Ghana: a reflection and response to 'Strengthening the call to involve mental health care service users and their families in psychosocial rehabilitation programmes', written with Advisory Group members for World Association for Psychosocial Rehabilitation (WAPR) Bulletin

A further five papers are under peer review on: evaluating the impact of district mental healthcare plans on service delivery, how user-led and policy level approaches complement each other, how to enhance the effectiveness of self help groups, participatory approaches to stigma reduction, and a process evaluation of the programme's theory of change.

Research and study summaries, as well as learning products and toolkits relating to all of our work are available on our website - **GhanaSomubi.com**



Scan for Resources



Scan for Videos



Scan for Publications

The programme's legacy

'This strategic plan which could cost GBU huge sums of money through hiring of consultant service, was reviewed by GBU staff and the Board president as a result of training received through the project. It also helped to build our internal capacity'

GBU (Ghana Blind Union) staff member

The programme's approach has always been mindful of the need to be sustainable. Strategies integrated in the theory of change sought to promote the legacy and sustainability of programme activities, such as:

- generating an evidence base
- providing direct technical assistance to government agencies and civil society
- building skills and knowledge of government agencies
- establishing formal and traditional structures to support programme visions
- building the capacity and skills of those awarded grants, civil society organisations and self-help groups
- training a range of volunteers
- creating a strategy and plan for changing behaviour in society.

The programme also funded grants which focussed on legacy and sustainability in four local disabled people organisations and women's right organisations. These grantees benefited from additional capacity-building sessions, knowledge sharing events and mentorship that was evaluated as making significant progress in building their institutional and technical capacities.

Looking forward

Work remains for civil society and governments if people with disabilities and mental health conditions are to reach their full potential. Civil society needs to maintain pressure on government targets to improve the infrastructure that governs health service delivery and deliver on commitments made. But civil society must also ensure that their own skills in leadership, governance and efficiency are maintained while supporting their individual wellbeing.

Our case study on 'supporting sustainability of programme goals' outlines how we have embedded sustainability in all we do, with the hope that stakeholders will work together to continue the important work needed to improve the lives for people with disabilities and mental health conditions.



















