

Extended service for neglected people living with mental health problems

Thousands of people living with mental health problems are forced to live a vulnerable life on the streets. Many are chained or locked up inside houses. Moreover, some women living in these vulnerable situations are also sexually abused, particularly while living on the street. Some of these women become pregnant. After the earthquake, the problems escalated. People living on the street are facing desperate situations but who is the responsible for them?

KOSHISH has been providing recovery treatment to people with mental health problems who are abandoned, chained or locked-up. We help to rehabilitate them back to their family and community. Despite hundreds of international donors being active in the promotion of psychosocial counseling, no agency seems to be dedicated to rescuing abandoned people.

KOSHISH has extended its 25 bed treatment service to 65 in response to the demand after earthquake. But, how can KOSHISH alone address the problems of people like these around the whole country? The question is very delicate. To get treatment and the opportunity to live a dignified life back in the community is a fundamental right of such people and there is no debate on it.

- Matrika Prasad Devkota
Chairperson, KOSHISH



Before



Now

Ambition trapped behind bars

Dammari (pseudonym), 30, who once had a dream to imprison the culprits has herself living behind bars for the last eight years. She was chained not for her criminal activities but only for her mental health problem.

Dammari had taken a trip to Nawalparasi with friends, a dream-come-true trip for the group, her Mother explained in an interview on national television. She travelled from Jhapa in Eastern Nepal but while there she accidentally fell. As a result she became deaf-like, only staring but not communicating. Worrying about their child, the family members didn't delay in getting her treatment. As a result, Dammari was taken to witch-doctor to get medical treatment. She was also given electric shock treatment in an attempt to improve her mental health

but every attempt failed. Her life was like that of a domestic animal.

With information from The National Human Rights Commission's Eastern Regional Office and Women and Children Office, Jhapa, KOSHISH helped her get out of the locked room so she could get proper treatment. She was brought to KOSHISH's short term residential care centre on 13th Feb, 2016.

With proper care and medication, the deaf-like Dammari has started to communicate with the staff of KOSHISH and her colleagues in the transit home. "As her problem is so severe and she has had wrong treatment previously, it will take additional time for Dammari to make a full recovery", suggested the psychiatrist observing her.

Serial sexual violence: Repeatedly raped woman again gives birth to a baby



Sita (pseudonym), 35, gave birth to a son at KOSHISH's short term residential care centre. This is the third time she has given birth as a result of sexual violence. She had been raped several times and had already had two babies on the street of Silgadhi, Dipayal of Doti district (FarWest Nepal). The condition of those children is unknown. Sita was rescued and brought for the treatment of her mental health problem from the street of Dipayal as per the information from Women and Children Office, Doti on 8th March, 2016.

Lots of women are becoming the victims of sexual violence and forced to become single mothers. Weak laws and ignorance resulting offences against and sexual violence towards people living with mental health problems.



Discussion on inclusion of issues related to psychosocial disability

It is a fundamental right of every individual to live a physically and mentally healthy life. Everyone is entitled to all the rights and must be respected regardless of their caste, religion, age, gender, language and / or on the basis of opinions of others. It is every state's responsibility to protect and promote these rights. In this regard, the Government of Nepal has already adopted the Convention on Rights of Persons with Disabilities (CRPD) in 2006. However, very little has been done by the State and existing law, policies, plans and acts do little to effectively address mental health and psychosocial issues in Nepal.

Nepal is now in the process of drafting the "National Policy and Plan of Action on Disability-2063". Taking this as an opportunity, KOSHISH conducted a discussion program on "National Policy and Plan of Action on Disability" in coordination with National Federation of the Disabled – Nepal (NFD-N) on 3rd March 2016. The program was held at NFD-N office with the active participation of representatives from organizations working in different disabilities sectors (related to physical, mental, vision, hearing, voice and



speech) and persons with disabilities. There were total of 33 participants (12 female and 21 male). The program was held with the purpose of carrying out an intensive discussion on the plan of action. It also aimed to sensitize relevant stakeholders on where and how mental health and psychosocial disability issues can be included in Policy and Plan of Action on Disability and why it is necessary.

The program was facilitated by Mr. Sudarshan, President of NFD-N. He briefly introduced the background of the draft, its prioritized themes and focus of each theme. Mr. Matrika Devkota, Chairperson, KOSHISH expressed his sincere concerns regarding inclusion of psychosocial health/ disability issues in the action plan. He stated that it should be done collectively rather than individually. It is not a separate issue nor only a matter for persons

with disabilities. In fact, it is associated with their family members and care givers. Likewise, Ms. Sharmila Parajuli, Legal expert / Team leader, KOSHISH, congratulated NFDN for nominating Mr. Matrika Devkota as one of the board members of NFD-N. This is a most praise worthy step by NFDN especially while existing laws are still discriminatory towards persons with mental health problem/psychosocial disability.

Lastly, Ms. Renu Lohani, representative of DPO, closed the program stating that psychosocial health is interrelated with all forms of disability. Hence, every individual/ organization working in this field should identify the ways towards inclusion of these issues in the upcoming 10 year Plan of Action and work together in unity. She further appreciated the steps taken by KOSHISH and NFD-N to bring organizations together and conduct the discussion program. The program also decided to raise the issues discussed in the program among relevant stakeholders of National Human Rights Commission (NHRC) and carry out constant follow-up for its implementation.

Identification of Mental Health Problem and Basic Psychosocial Counselling Training

KOSHISH conducted 3day long 'Identification of Mental Health Problem and Basic Psychosocial Counselling Training' on 16-18 March, 2016 in coordination with the District Public Health Center, Tahahu and with support from CBM Nepal. Altogether 30 people in the district including 20 women health volunteers, 5 ANMs and 5 traditional healers benefitted from the training.

The training was organized in order to improve the capacity of the participants to identify mental health problems, inspiring them to motivate clients to visit the service centers and to prepare them to provide basic psychosocial counselling in the district.

The public health officer of District Public Health Center, Tanahu appreciated this type of training and hoped for further mutual cooperation in the coming days.

Senior clinical Psychologist Rajan KC and psychologist Leela Khanal facilitated the training which included an introduction to mental health and psychosocial problems, depression, risk of suicide, epilepsy, conversion disorder, and abuse of alcohol. Participants were taught the theory of basic psychosocial counselling and given the opportunity to practice.

At the conclusion of the program, Maya Devi Seti, one of the participants shared "Although she used to encounter



persons living with various mental health problems she was previously uninformed about the problems." She added, "It is the first time she has taken this type of training and had the opportunity to build capacity to provide basic level counselling in the community." KOSHISH intends to train an additional 400 community members with this training in the coming two years.

Orientation for Mainstreaming Mental Health and Psychosocial Disabilities

KOSHISH conducted three orientation programs on Mainstreaming Mental Health and Psychosocial Disabilities in Kathmandu with the aim of making people with mental health problems capable of 'self-advocating' for their rights.

The first program was conducted to motivate persons experiencing with mental health problems to lobby for their rights through hearing the struggle and success stories shared by disability movement activists like Shudarshan Subedi, Tika Dahal, Minraj Panthi, Devi Acharya, Matrika Devkota and

Mathura Kunwar. The program was conducted from 20-22 January, 2016 and 30 people (16 women and 14 men) actively participated.

Similarly, the second program prioritized the participants of the first program in order to sensitize them to and raise their awareness of the skills to divert the mind towards positive thinking, develop self-consciousness and creative thinking; to build their capacity to deal with a tense atmosphere and their decision-making capacity to solve problems. Psychologist Binod Poudel was the facilitator in the program scheduled from 24-26

February, 2016.

Finally, in the third program, seven executive board and members of KOSHISH were provided with leadership training on 10-11 March, 2016. Jagdishwor Devkota, Minraj Panthi, Suraj Sigdel and Sunita Danuwar assisted the participants to understand different dimensions of leadership.

The persons having mental health problem are often reluctant to share their real problems because of the perception of community, as a result, they are deprived of their fundamental rights. Despite the country achieving significant economic and social change over a short period, the condition of those with mental health issues is largely unchanged.

Monthly OPD and Medicine Support at Tanahu and Bhaktapur

To make medical treatment accessible at community level, KOSHISH is conducting OPD services in coordination with Local Health Offices at Tanahu and Bhaktapur districts of Nepal. These services enable people experiencing mental health problems who were previously without medicines to receive prescribed medicines free of charge.

Here are the details of persons came for the support in last three months:

Services	Bhaktapur					Tanahu				
	F	M	T	Old	New	F	M	T	Old	New
OPD	75	70	155	108	47	72	63	135	55	80
Medicine	77	59	136	38	98	7	5	12	2	10

To address the increasing numbers of clients, OPD service is now conducted twice a month at District Hospital, Tanahu.

Place and Time for OPD Service

Place	Time
Tanahu District Hospital, Damauli	Every 1st and 3rd Sunday of the Month at 11 am.
Chyamasing Public Health Care Centre, Bhaktapur	Every 2nd and last Tuesday of the month at 1 pm.
District Public Health Office, Bhaktapur	Every 1st Tuesday of the month at 1 pm.

With this community based service, patients are also provided individual and group psychosocial counselling as needed.

First Self-Reliant Group Form

The first self-reliant group has been formed at Ward no. 5 of Byas Municipality of Tanahu. An initiative of KOSHISH, ten persons experiencing mental health problems (6 women and 4 men) grouped together aiming to provide opportunities to share their feelings, solve problems, to help to get to know each other and to motivate income generating activities. In the presence of KOSHISH's representative, all the members gather once a month and conduct activities to develop self-reliance and self-respect.

KOSHISH also intends to form more groups of this type in the coming days.



KOSHISH's Contact Office at Damauli

KOSHISH has opened its first contact office outside the Kathmandu valley. The new contact office was needed in order to make the ongoing community based mental health and psychosocial support program more effective for people living with mental health problems. In coordination with Public Health Office, Tanahu and with support from CBM Nepal, KOSHISH established the office at Damauli of Byas Municipality, Tahnahu district (western part) of Nepal from April, 2016.

With this achievement, KOSHISH became the first organization to provide physical counseling and psycho-education in Tanahu district. The Program Coordinator, Psychosocial counsellor and social mobilizer will provide services in communities.

Stakeholders in Tanahu welcomed this step by KOSHISH and hope for positive coordination and collaboration in the coming days.

Caged person got treatment at KOSHISH

Some people experiencing mental health problems are being chained, locked-up or forced to live a neglected life in the street due to late or wrong diagnosis of their problem. Ram Bahadur (pseudonym), 40, from Dolkha is one example, he was locked-up inside a cage for one year due to a failure to get appropriate treatment in time.

Ram Bahadur used to roam around the village with mental health problems. He received no treatment. His condition got more severe after the last year's devastating earthquake. His uncontrolled and aggressive behaviors forced the poor and illiterate family members to borrow money to make a cage for him. Ram Bahadur was treated as a domestic animal.

When one of the national daily papers covered the news of Ram, KOSHISH visited the place and freed him immediately. KOSHISH then brought him to its short term residential care centre on 16 February, 2016.

Within a period of two months, Ram started to communicate properly. His aggressions were able to be completely controlled. Nowadays, he always makes himself busy in therapeutic activities and other group works inside the home.

The first news article about Ram brought sympathy not just from KOSHISH but also from open-hearted Nepalese around the world. A huge amount of money was collected for his treatment and support but donors were unaware whether that money was properly used or not.

Miracle Change

After only one and half month's short term residential care, the mental health condition of Shankar (pseudonym) who had been roaming in the New Road area of Kathmandu has dramatically changed. KOSHISH rescued on 7th March, 2016. With his gradual improvement and some other clues, KOSHISH was also able to identify Shankar's family and helped him to reunite with them in Dolkha on 21st April, 2016. The Shankar's parents were delighted to be reunited with their lost son.



You can be part of
KOSHISH by:

- ♦ providing social and spiritual support
- ♦ providing food and cloths to the survivors
- ♦ providing medicine support for the clients
- ♦ providing time voluntarily
- ♦ providing financial support

For the financial support:
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