

# Mental Health

## PROGRAM PRIORITIES

- Depression
- Epilepsy
- Psychotic Disorders
- Child and Adolescent Mental Health Concerns
- Training & Community Outreach

## IMPACT

**2,000 patients** enrolled in mental health services per year

**About 7,000 mental health visits** conducted for patients per year

From January 2017 to May 2019, the team trained

providers on various mental health topics:

- 21 psychologists
- 13 social workers
- 65 physicians and nurses
- 182 CHWs
- 75 community health leaders
- 32 teachers
- 15 data officers

Zanmi Lasante (ZL) began providing mental health services to patients in 2005. Since then, ZL's mental health team has broadened its scope in close collaboration with the Haitian Ministry of Health (MSPP) to create a comprehensive community-based model for mental health care service delivery. In 2012, ZL expanded its mental health program, with a set curricula, applied tools, and protocols to various providers, across five care pathways: depression, epilepsy, psychotic disorders, and child and adolescent mental health.

## PROGRAM HISTORY

According to the World Health Organization, in low- and middle- income countries 76-85% of people living with mental health conditions receive little to no treatments. One of Haiti's greatest challenges is the lack of access to mental health care. After the 2010 earthquake, there were just five psychiatrists and one neurologist for a population of over 11 million. Only 4.5% of Haiti's national budget appropriated funds to the Haitian Ministry of Health (MSPP), with less than 1% allocated to mental health, making the availability of mental health services and specialists across the country very limited.



## SCREENING FOR DEPRESSION

The ZL Depression Symptom Inventory is a screening tool that assist clinicians to identify depression. It lists the symptoms using both local and universal descriptions of the illness. Clinicians within ZL network are trained to screen patients for signs of depression, following up with a clinical evaluation.



## INTEGRATION OF MENTAL HEALTH SERVICES

The 2010 earthquake exacerbated the already significant need for mental health services in Haiti, with high levels of depression, anxiety, and stress having developed over decades of unemployment, violence, and political instability. Mental health services started weeks after the earthquake. In addition to heightened post-traumatic stress disorder (PSTD), the earthquake revealed just how significant the burden of various mental health conditions already was.



## MENTAL HEALTH CURRICULUM DEVELOPMENT

Starting in 2017, the ZL mental health team began developing a trauma-specific mental health curriculum for CHWs and psychologists on the provision of evidence-based therapy for trauma-related conditions, making them more aware of the signs of trauma in relation to the Haitian context. In August 2018, the mental health team expanded the curriculum to include child and adolescent mental health (CAMH) for psychologists and CHWs.



### MENTAL HEALTH AND YOUTH

The mental health team studied the effects of the earthquake on the mental health of Haiti's youth. The mental health assessment included a Stressful Life Events Checklist, which is a 13-item questionnaire documenting exposure to a broad range of stressful life events, including sexual abuse, armed conflict, and separation from family. All of the students who filled out the assessment reported at least one stressful life event, but surprisingly the exposure of the earthquake was not significantly associated with PTSD among the youth in Haiti. Nevertheless, the earthquake did present an opportunity to raise awareness about the urgent need for quality care in the mental health department in Haiti.

### OVERCOMING MENTAL ILLNESS

Paul Mainardi, 22, began spontaneously hearing voices and hallucinating when he was about 20-years-old. He began to believe that demons were persecuting him, and sought help through the church. When that didn't help him, he was taken to ZL's facility in Lascahobas, where he began psychotherapy and received medication for symptoms of psychosis. He was cared for by a collaborative team of providers, which included a psychologist, CHW, and a general physician. He was able to overcome a mental illness, and has been sharing his experience with others to prevent the harm that can come from not receiving care on his radio show. During the show, he describes the range of clinical mental health providers available in the community such as CHWs, nurses, social workers, psychologists, generalist physicians, and, if needed, a psychiatrist.

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