

KOSHISH extended its services in Bagmati Province and Gandaki Province in response to COVID-19

The rapid increase in the number of people with COVID-19 infection has affected the life of people and many of them have been living in distress and uncertainty. As per Nepal Police, number of suicides during the period of this pandemic has reached to 1227. The situation has threatened both the physical and mental health of the general people. Physical distancing, self-isolation and quarantine are triggering reactions of isolation and loneliness.

Realizing that the prevalence of common mental disorders such as depression and anxiety are expected to more than double in this humanitarian crisis, KOSHISH has extended its services in Bagmati Province and Gandaki province June, 2020 to address the need of mental health and psychosocial support during the crisis situation.

Psychosocial support including psychological first-aid, tele-counseling, follow up and referral services is being provided as part of the COVID-19 response. Three Psychologists/Counselors in each of these Provinces have been assigned to provide 24 hours tele-counseling service to the persons having psychological distress and problems. Public Service Announcements have been developed and broadcast on FM radio and also distributed over social media for mass awareness about the COVID-19 and its impact to the psychosocial wellbeing of the persons. This initiative will contribute towards addressing the current pandemic caused situations and its effect on the psychosocial wellbeing of the persons having psychosocial problems.

The people from Bagmati Province who are in need of psychosocial support or information regarding COVID-19 may contact at Toll Free Number 166001-22322. The people from Gandaki Province may contact at Toll Free Number 166001-22322 and receive free Tele-counseling support.



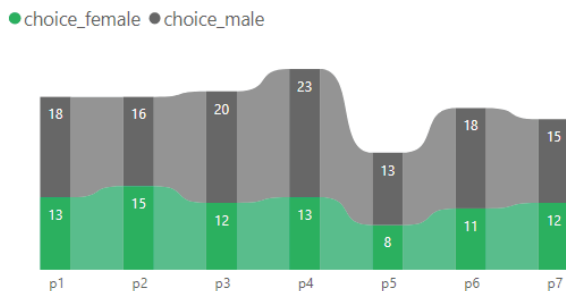
Studies on Impact of COVID-19 and LOCKDOWN

KOSHISH has completed 50% of data collection for the study on "Impact of COVID 19 and Lockdown on Mental Health and Psychosocial Wellbeing of Persons with Disabilities." The study is being conducted in combine effort of the National Federation of the Disabled (NFDN) and CBM. The study has ethical approval from the National Health Research Council (NHRC).

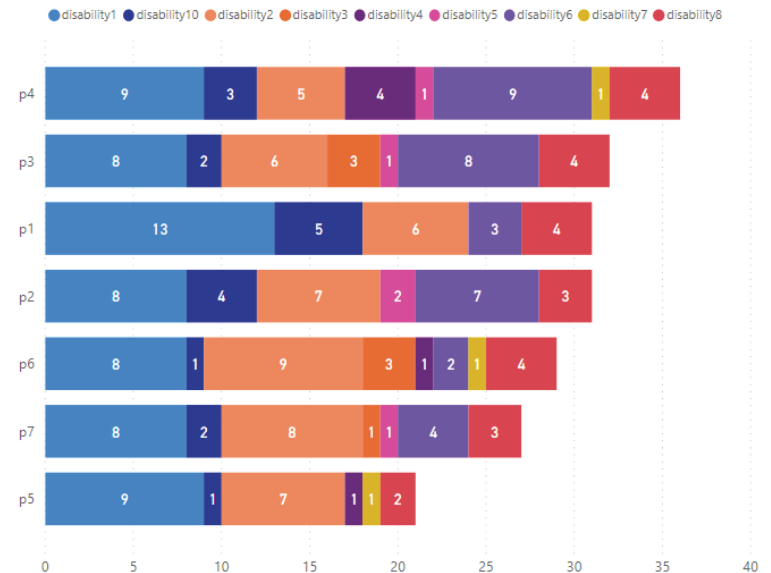
Similarly, KOSHISH has submitted a proposal to NHRC on June 17, 2020, for ethical approval to conduct a study on "Impact of COVID 19 and Extended Lockdown on Mental Health and Psychosocial

Wellbeing of People in Nepal." The study will provide an in-depth understanding of the state of mental health and psychosocial wellbeing of general people during COVID 19 pandemic and extended lockdown. The study will support the government, mental health activists, NGOs, INGOs and mental health professionals to strengthen their plan, policy, and service for better mental health interventions to prevent secondary crisis (may be caused by mental health problems). In contrast to other studies on mental health in COVID 19, it is being done after a significant time of pandemic and lockdown in Nepal. Hence, the most important aspect of the study is to provide facts for comparing the impacts of COVID 19 and Lockdown on mental health and psychosocial wellbeing at different stages of COVID 19 pandemic. The proposed survey is a cross-sectional quantitative study. Online survey method will be used to collect data for the study. For the study, KOSHISH is administering the COVID-19 Pandemic Mental Health Questionnaire (CoPaQ) CoPaQ. It is a newly developed and highly comprehensive self-report measure of personal and social consequences of the COVID-19-pandemic with an application scope world-wide. The questionnaire covers a wide range of areas of interest affected by the COVID-19 pandemic; that is, COVID-19 infection status, socio-demographic background, and the impact on risk perception, affect, thoughts, behavior, mental health, media usage, institutional trust and social cohesion.

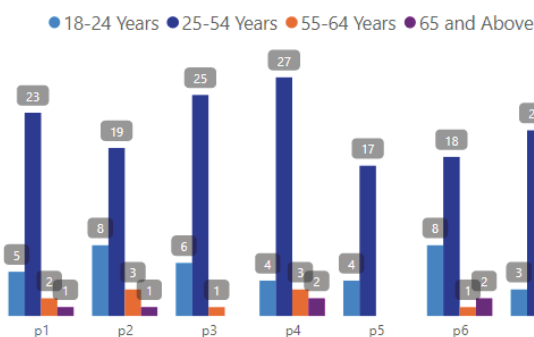
Province-wise Samples by Gender



Province-wise Samples by Types of Disability



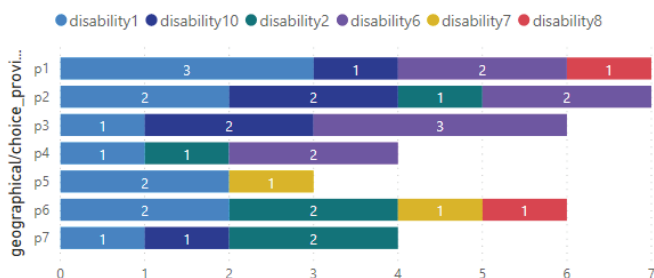
Province-wise Samples by Age Group



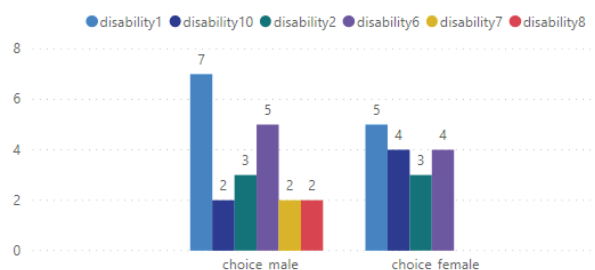
Total Samples Collected So Far
209

- disability1 (Physical)
- disability2 (Vision)
- disability3 (Hearing)
- disability4 (Vision-Hearing)
- disability5 (Voice)
- disability6 (Psychosocial)
- disability7 (Intellectual)
- disability8 (Haemophilia)
- disability9 (Autism)
- disability10 (Multi)

Persons with PROFOUND Category of specific Disabilities



PROFOUND Category by Gender



Tele-Mental health: When technology meets psychosocial wellbeing needs

During this COVID-19 pandemic, tele mental health service has offered many opportunities, including improvement of the individuals' experience, increased mental health care access, and reduction of health care costs. Online clinical supervision from psychologists and psychiatrist to local health professionals has helped to manage most of the mental health issues at the community level.

'I heard that a man was running towards Daraudi River to dive and end his life. I immediately ran towards the river, pulled him from the bank of the river and took him directly to my health post. He agreed to discuss the matter with a professional in a video call. I arranged a video call with an expert and managed the case from here. I had never believed that mental problems are treated and I could do that all myself!', says Lalita Gurung, In-charge of Gankhu Health Post, Gorkha. She has already dealt with 7 cases of suicidal ideation and attempts during this lockdown. During this period, she has provided mental health service and counseling to more than 100 individuals under clinical supervision from KOSHISH.



*Lalita Gurung, In-charge
Gankhu Health Post, Gorkha*

Lalita has been working in health sector from 2 decades. 11 years ago, she received a capacity building training related with mental health but she could not practice her learning and skills because nobody seek mental health services from a local health post. Last year, she participated a six days training on mental health and psychosocial wellbeing provided by KOSHISH. After the training, she is regularly receiving online clinical supervision and mentoring from senior consultants.

As many individuals are currently experiencing increased levels of stress, anxiety and depression, mental health services must continue to prevent further decompensation and avoid potential consequences like relapse of previous mental health problems, suicidal thoughts and attempts and other severe problems in the face of a pandemic that strains health care resources.



Binita Tamang provides mental health service to an individual in Khudi Health Post, Lamjung. Binita is trained in Basic Mental Health and Psychosocial support and is receiving regular online supervision from KOSHISH.

Binita Tamang, In-charge of Khudi Health Post, Lamjung, was surprised to meet many individuals seeking mental health services from her health post during this lockdown. Binita provided mental health treatment to more than 70 individuals in this period. She says, 'There are many hidden cases of mental health problem in the community and were always unreported before. When people heard that mental health services are available in Khudi Health Post, many of them did not trust us at first. Awareness plays a vital role in this matter.'

Globally, mental health problems are a growing concern. Unfortunately, there are not enough mental health professionals to help every case. Training other

healthcare providers in mental health topics is a possibility; yet, being dependent on face-to-face training alone is not scalable. The use of technology could be an important strategy to reach effective mental health care and address disparities in services.

COVID-19 and lockdown led to severe effect on Mental Health



COVID-19 pandemic has an adverse effect on the mental health of people around the globe due to its uncertainty of eradication of the virus and lockdown situation. In Nepal, the spread of virus has been increasing rapidly with increasing number of positive cases daily. The number of suicide cases has also increased during this crisis situation. So, far 1227 suicide cases have been reported since the starting of the COVID-19 pandemic.

21 year-old Ramila Bhandari (pseudonym) was rescued and brought into KOSHISH transit home after she tried to take her own life during this lockdown situation. She experienced mental health problem from a very long time and tried unsuccessful suicide for many times. But before COVID-19 pandemic, her condition was improving and she was under medication and counseling services. She was working as a receptionist in an office and was happy with her job. She was recovering but the crisis situation changed everything. She used to stay alone in a rented room in Kathmandu. The lockdown situation added loneliness in her life. She was confined to stay alone in the room which triggered her condition and she again tried to take her

own life. After 48 hours of supervision in the hospital she was brought into transit home for short term psychosocial support and care.

In the initial days, Ramila was quiet and detached from everyone in transit home. With the proper care and support in the transit home, she started opening up and engaging in therapeutic activities at transit home. She is under psychiatric care and psychological support at transit home. Her mental health condition is gradually improving. She is only one of the many people who are experiencing mental health problems during this crisis situation but still it is the most neglected area in the health sector. This is a serious issue which needed to be addressed and emphasized by the government.

Psychological First Aid: First and foremost support in Emergency



"I feel numb when I can't help anyone. I don't want to live anymore just watching innocent people dying every day." Shyam (pseudonym), a 48-years man, contacted to a helpline service and complained one mid-night. After a month of online counseling service from a Psychologist, Shyam has improved a lot. He also consulted with a psychiatrist in a video call arranged by KOSHISH. Public health actions, such as physical distancing, can make many people feel isolated and lonely and can increase stress, anxiety and depression.

The use of social distancing to “flatten the curve” and prevent the spread of COVID-19 has changed the regular modality of community mental health services. World widely, psychological first aid is being used to support those in need of mental and wellbeing support in emergency situations. KOSHISH also initiated online counseling and psychological first aid service just after the declaration of nationwide lockdown. A total of 779 persons received tele mental health services during last 3 months of lockdown. 387 persons with psychosocial issues were reached through phone follow up service, 173 persons through psychological first aid and 77 persons were provided psychosocial counseling service. 89 persons with mental health problems were referred to other services. 33 persons with disability were linked to other service like relief package of government and emergency health care. “It’s an extremely positive thing for me to support people who need help. As a community psychosocial worker, I’ve seen there’s a vast need to help people, and to let people know they’re not alone in what they are going through.’ says Gita Ghale one of the Community Psychosocial Worker (CPSW) of KOSHISH.

Bipin Ghimire, CPSW of KOSHISH says, “I’ve talked with 150 community people about their various issues and they feel good when someone listens them in difficult situation.”

Dipak Neupane, Psychologist from KSOHISH says, “There have been some very tough talks, and I have needed to access more specialist support for those. The more we are open about these issues the better it will be”.

Rajendra BK says, “I’m happy to be there to help others with their issues, so ultimately I’m doing what I want to do in life. It’s great seeing someone feel positive after a few talks and to help them connecting to required services”

