

Value Chain Implementation Framework and Workplan for Scale-Up

*PIH teams apply systems-level analysis about mental
health care planning and delivery*



What is this document?

Learning from the Value Chain as an Implementation Framework

About the Project

With generous support from Grand Challenges Canada, Partners In Health (PIH) demonstrated how the Value Chain can be used as an implementation framework to increase implementation capacity at four of our sister sites: Liberia, Lesotho, Mexico, Peru.

Purpose of this Document

One of the core deliverables of the grant was to document how the Value Chain can be used to support program design, service delivery, and improve patient outcomes. This document also captures each site team's priorities for scale and sustainability. There are five deliverables in one document.

Overview of Content- five project implementation frameworks developed and shared

- Summary of the Mental Health Learning Collaborative and Cross-Site Collaborations
- Project Implementation Framework #1: Learning from Liberia- Reintegration
- Project Implementation Framework #2: Learning from Peru- Treatment
- Project Implementation Framework #3: Learning from Mexico- Treatment
- Project Implementation Framework #4: Learning from Lesotho- Crisis Response



Photo source: Patient Peer Support Group engages in livelihood activity, Kirehe, Rwanda. Taken by Jean Paul Ndayamabaje

I. Summary of the Mental Health Learning Collaborative and Cross-Site Accomplishments

Overview of the Mental Health Learning Collaborative

Partners In Health's work in mental health is unique in the field of Global Health for the ways in which PIH creates actual, ongoing, community-based, primary care and hospital-linked, mental health systems to provide mental health and psychiatric care for complex conditions in settings where heretofore there have been no services available, in the area of global mental health service delivery. PIH has responded to humanitarian crises as opportunities to strengthen health systems following catastrophic events by building integrated models of care for complex mental health conditions, demonstrating the feasibility of task-shared, locally adapted services that are collaborative, comprehensive and community-based, for the long term, in "real-world" settings. With the support of GCC in Haiti (2012-16) and Rwanda (2013-15), expanding to other sites including Peru, Mexico, Lesotho and Liberia (2020-22) over the past decade, PIH has created a substantial, measurable, innovative global mental health care delivery model that is unique in the world for its capacity to address complex, co-morbid mental health conditions (common *and* severe mental disorders, together) in low resource settings.

The foundation for PIH's success to date has been PIH's innovative **Mental Health Learning Collaborative (MHLC)**, a unique cross-national consultation model and learning collective formalized in 2016, which offers an effective and functional platform to address global mental health delivery challenges by sharing and improving practices within and across sites. **The MHLC was made possible by four grants from Grand Challenges Canada between 2012 to present, in Haiti, Rwanda, Peru and across sites (TTS2).** The MHLC has focused on both increasing the reach and quality of services provided by health workers who deliver evidence-based, culturally adapted mental health care, and ensuring that the health systems in which they work are equipped to support and manage the services they provide. The MHLC has accelerated progress towards effective mental health care delivery across 11 PIH sites, with four sites implementing direct services to strengthen care across the value chain in **Peru, Mexico, Liberia and Lesotho.**



Overview of Cross-Site Coordination Activities

Summary of key activities and accomplishments

The Cross-Site Mental team provides technical advice and administration support in clinical supervision, program implementation, monitoring and evaluation and targeted research in collaboration with our care delivery sites around the world.

Additionally, the team assembled the following resources:

- Self-paced PIH Mental Health Value Chain eLearning course on OnePIH's learning platform.
- Virtual four-part PIH Mental Health Value Chain Workshop Series
- PIH Mental Health Services Planning Matrix Resource Guide
- Online Resource Library
- Mentorship and Case Clinics
- Steering Committee focused on psychosocial rehab (piloted in Liberia)
- Collaborative Calls and Cross-site Coordination



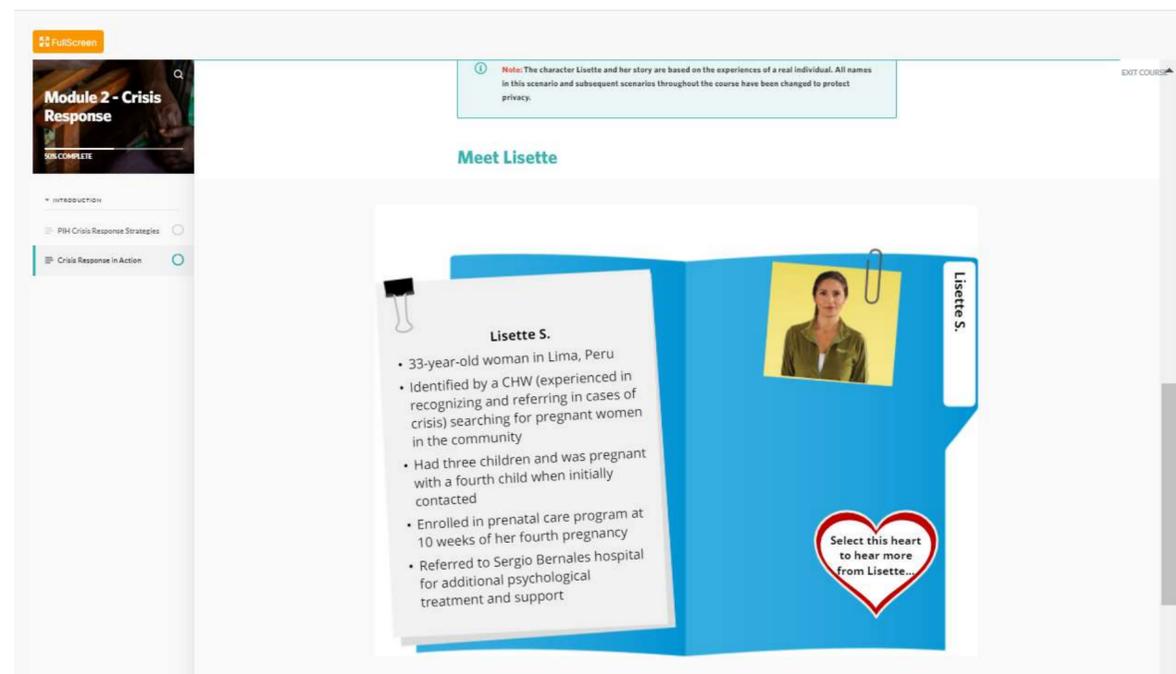
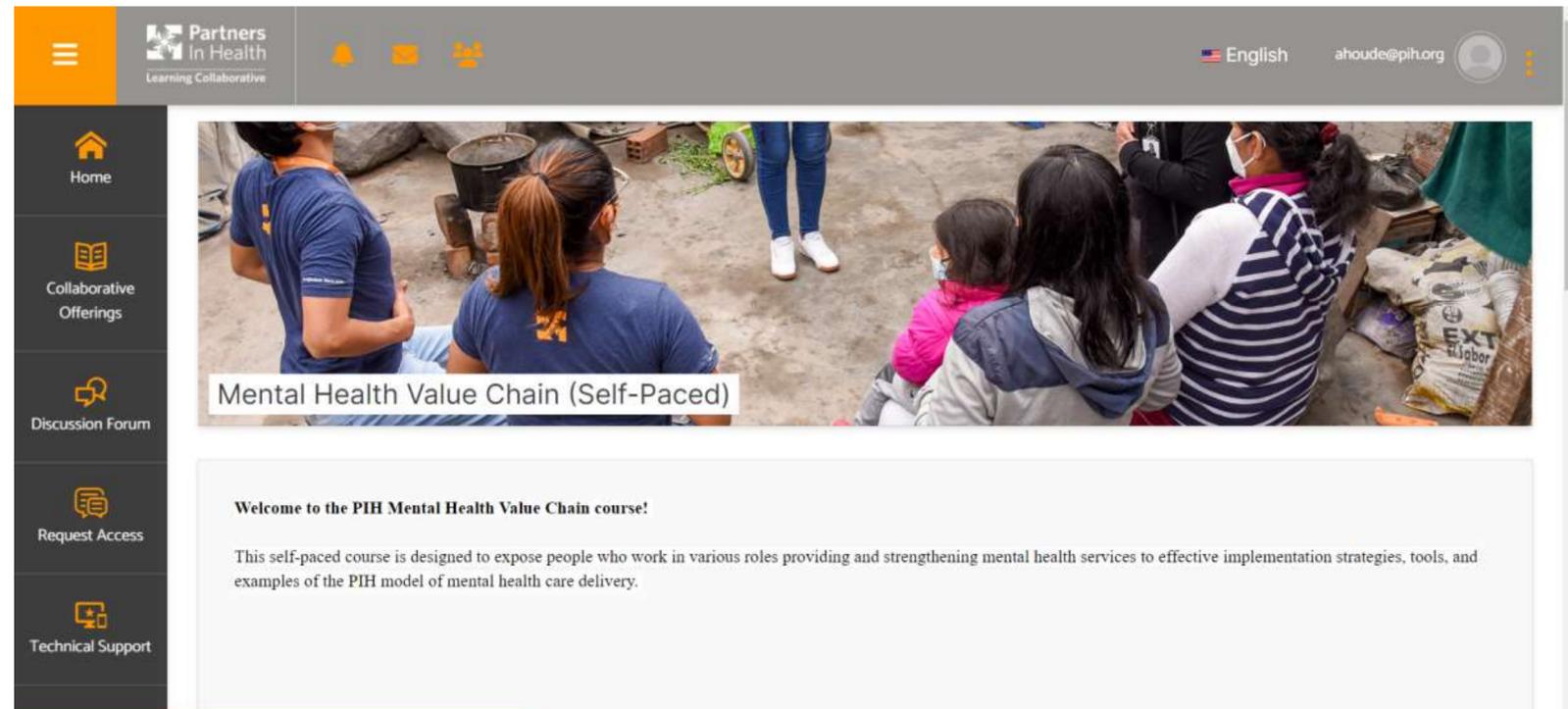
Summary of tools created under GCC: Self-Paced eLearning Mental Health Value Chain Course hosted on Tovuti

The Cross Site Mental health Team lead the development, design, testing and launch of a self-Paced, eLearning PIH Mental Health Value Chain Course on OnePIH's Learning Platform hosted by Tovuti.

To enter and review the eLearning Mental Health Value Chain course modules click links below:

[PIH Learning Portal](#)

If you are a first time user, click on "New Member Registration" on the top right



Summary of tools created under GCC: Virtual Value Chain Workshop Series- Training Tools to Support Interactive Virtual Learning

Communication and Training Tools for the virtual Mental Health Value Chain Workshop Series include:

- One-Pager descriptions of the course (translated into French, Russian, Spanish and English)
- Participant guides, breakout room guides
- Jamboard and Padlet Brainstorm artifacts
- Case Study Activities and participant poll results all which supported interactive virtual learning.
- Open access!

PIH MENTAL HEALTH VALUE CHAIN
Injustice has a cure.

WHAT IS A MENTAL HEALTH VALUE CHAIN?

Over the past ten years, Partners In Health (PIH) has developed and grown mental health delivery programs across each of its eleven partner countries. While each site's cultural, social and political contexts required unique processes and methods to build these programs, all programs shared overall guiding principles and a set of key components that have been adapted and implemented for evidence-based, sustainable programming.

The **PIH Mental Health Value Chain** —a map of the care delivery system—describes key elements essential in the delivery of quality, high-value care for mental health patients. As a core component of **PIH's Service Delivery Planning Matrix**, the Value Chain supports planning and local implementation across PIH sites. Emphasizing PIH's commitment to progressive decentralization, this value chain highlights key elements for care at health facility and community levels identifying ways in which a patient moves through the health system to get care.

THE PIH MENTAL HEALTH VALUE CHAIN WORKSHOP SERIES

In this four-part workshop series, participants use PIH Mental Health Services Planning Matrix as a toolkit to document site-level examples in a Mental Health Value Chain Implementation Framework. The workshop series culminates in participants applying systems-level thinking and analysis about mental health care planning and delivery using service-user experiences at the site level. *Upon completing this workshop series, participants will increase their ability to demonstrate the following learning objectives:*

Workshop 01: Value Chain Defined (Oct 2021)

- Communicate the link between the PIH Service Planning Matrix, Universal Health Coverage and The Value Chain
- Describe nature of 'value' in the value chain after learning from two case study examples from Paru and Lesotho

Workshop 02: Examining Workshop Components- Part I (Nov 2021)

- Describe how the interrelationships between the value chain components create value for service users.
- Document patient-level activities in a value chain using a case study example from Haiti

Workshop 03: Examining Workshop Components- Part II (March 2022)

- Apply systems-level analysis about mental health care planning and delivery using site based examples
- Create a site-based Value Chain Implementation Framework.

Workshop 04: Applying Value Chain Components (May 2022)

- Demonstrate how aspects of a site's value chain have changed and improved
- Learn from ten site-based presentations highlighting key improvements in mental health care delivery using the Value Chain

TOOLS FOR USE
Participant Guides, online interactive tools such as Padlet, Jamboard, participant polls, and breakout rooms support interactive virtual learning.

TOOLS FOR USE
Case studies created from site-level patient experiences add relevance and complexity to the discussion and activities.

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CASE STUDY #1: LINEO'S STORY
Part II: Lineo's Care Pathway: A closer look

STEP 1:

- Lineo was referred to mental health services by a concerned family member, her mother, Lebohng.
- Lebohng connected with a CHW who accompanied both to the health facility for services.

STEP 2:

- Lineo's TB clinician was trained to screen TB patients for depression.
- Lineo screened positive for depression, using the PHQ-2 and was referred to a Mental Health provider.

STEP 3:

- Once connected to the MH clinician, Lineo was assessed for mental health conditions including use of the PHQ-9.
- Lineo was diagnosed with moderate depression.
- The care team made a treatment plan which included psychoeducation, psychotherapy (using PM+), support for transportation, and a food package.
- Lineo's follow up plan was to meet once a week with the clinician for PM+ and afterwards a monthly check-in by the CHW.

Activity Instructions:

Review the seven components of the Value Chain in the appendix and come to a shared understanding about its meaning. Review Lineo's story and consider the following.

Questions

1. What activities did you see that addressed **Crisis Management**?
2. What activities did you see that addressed **Prevention**?
3. What activities did you see that addressed **Case Finding**?
4. What activities did you see that addressed **Assessment/ Evaluation**?
5. What activities did you see that addressed **Treatment**?
6. What activities did you see that addressed **Follow-up**?
7. What activities did you see that addressed **Reintegration**?

Cross-Site

Mental Health Value Chain Workshop #3

Break-out Room Instructions and Participant Guide

Summary of tools created under GCC: PIH Mental Health Services Planning Matrix Resource Guide

- During the grant period, the Cross-Site Mental health team created the **Mental Health Services Planning Matrix Resource Guide** to share the cross-cutting principles as our seven major components of the PIH Mental Health Value Chain. The document also includes links to resources and frameworks developed by PIH teams to put each of the values into action to build sustainable mental health systems in low resource settings.

[PIH Mental Health Value Chain Resources Final.pdf](#)

Partners In Health: Mental Health in Action 

Over the past ten years, Partners In Health (PIH) has developed and grown mental health delivery programs across each of its eleven partner countries. While each site's cultural, social, and political contexts required unique processes and methods to build these programs, all programs shared **overall guiding principles** and a set of **key components** that have been adapted and implemented for evidence-based, sustainable programming.

In this document, we share these **cross-cutting principles** as our seven major components of the PIH Mental Health Value Chain. We also link to **resources and frameworks** developed by PIH teams to put each of these values into action to build sustainable mental health systems in low resource settings.

PIH MENTAL HEALTH VALUE CHAIN



The **PIH Mental Health Value Chain**—a map of the care delivery system—describes key elements essential in delivering quality, high-value care for mental health patients. The seven core components of the Mental Health Value Chain include:

 <p>Crisis Response <i>Supporting initial mental health and psychosocial responses in times of crisis</i></p>	 <p>Treatment <i>Providing patients with appropriate quality care, support, and medications</i></p>
 <p>Prevention <i>Addressing stressors contributing to mental health conditions and educating health practitioners</i></p>	 <p>Follow-Up <i>Monitoring patients' clinical improvement and functioning and ensuring that they are supported for treatment adherence</i></p>
 <p>Case-Finding <i>Identifying persons living with mental conditions and referring them to appropriate care</i></p>	 <p>Reintegration <i>Supporting persons living with mental health conditions in assimilating to daily life within their communities</i></p>
 <p>Assessment <i>Evaluating new patients to ensure proper diagnosis and linkages to appropriate treatment</i></p>	<p>For More Information on PIH Mental Health</p> <ul style="list-style-type: none"> PIH Mental Health Overview PIH Mental Health Value Chain PIH Mental Health Service Planning Matrix PIH Mental Health Fast Facts

Emphasizing PIH's commitment to progressive decentralization, this value chain highlights key elements for care at **health facility** and **community levels**, identifying ways in which a patient moves through the health system. It can also be tailored to **local health systems** and **available care delivery levels**, including at the community, health center, district, and hospital level.

Key Resources and Frameworks Adapted for Cross-Site PIH Mental Health Program Implementation 

Below, we have provided examples of materials and stories that relate to each step of the Value Chain. Please note, these examples are not all encompassing. For more materials, we encourage you to continue to explore our [Research Library](#).

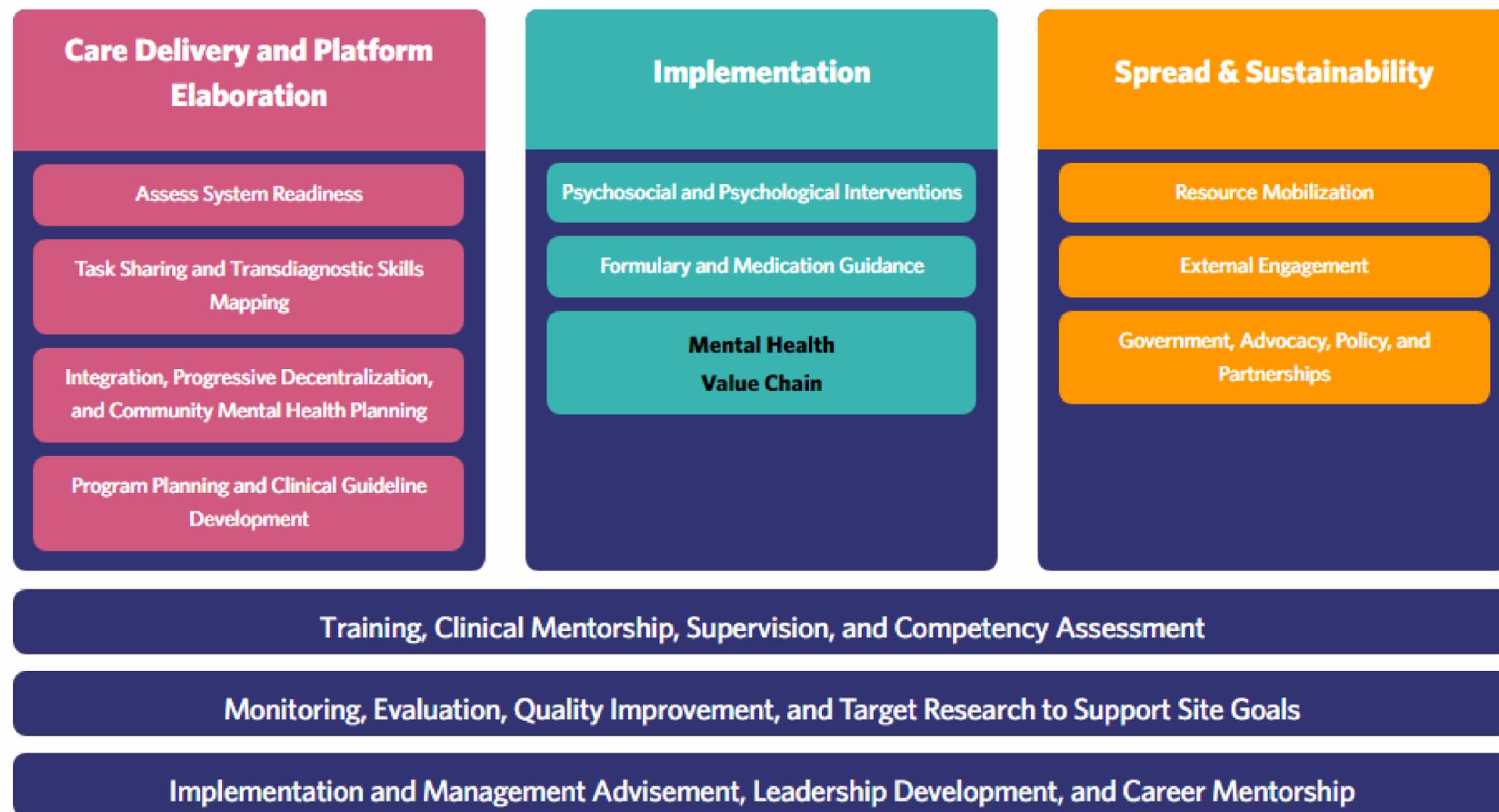
<p>Crisis Response</p> <ul style="list-style-type: none"> PIH Situation Analyses Summary PIH Psychological First Aid Training Slides <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> Zanmi Lasante Mental Health Medication Provider Reference Cards PIH StopCOVID: Mental Health Socios en Salud Mental Health Care in COVID-19 Reflections on Developing a Community Mental Health System in Post-Earthquake Haiti 	<p>Prevention</p> <ul style="list-style-type: none"> PIH Mental Health Sample Package of Training Materials for Health Providers and CHWs PIH Staff Wellness Initiatives <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> Inshitu Mu Buzima Self-Help Groups PIH Malawi Supporting Survivors of Sexual Assault
<p>Case-Finding</p> <ul style="list-style-type: none"> PIH Haiti Zanmi Lasante 5x5 Tasksharing Pyramid PIH Community Health Worker Algorithm PIH Mental Health Skills Packages Mapping Integration of Care for NCDs and Mental Health PIH 5-SPICE Framework for CHW Program Design, Quality Improvement, and Research <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> Compañeros en Salud Validation of PHQ-9 Tool PIH Malawi Integrated Care Cascade Toolkit PIH Kazakhstan Mental Health for TB Patients 	<p>Assessment</p> <ul style="list-style-type: none"> PIH Overview of Clinical Assessment Tools PIH Indicators for Mental Health Delivery PIH Mental Health Patient Card PIH Burden of Disease Report <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> PIH Sierra Leone Mental Health Register Sample Zanmi Lasante Mental Health Case Study Inshitu Mu Buzima Mentoring and Enhanced Supervision at Health Centers Program
<p>Treatment</p> <ul style="list-style-type: none"> PIH Overview of Psychological Interventions PIH Problem Management Plus Material Sample PIH Cross-Site PM+ Adaptation Key Takeaways PIH Child and Adolescent Mental Health Curriculum for Psychologists <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> Zanmi Lasante Mental Health Reference Guide Compañeros en Salud Clinical Algorithms for Mental Health Conditions Inshitu Mu Buzima Mental Health Care Pathway Socios en Salud Thinking Healthy Curriculum Socios en Salud Problem Management Plus 	<p>Follow-Up</p> <ul style="list-style-type: none"> PIH Electronic Health Information Systems PIH Mental Health Quality Improvement Scorecard <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> PIH-Kazakhstan Care for TB Patients' Mental Health PIH United States STOPCovid Check-In Guide Compañeros en Salud Enhancing Assessment of Common Therapeutic Factors PIH Sierra Leone Pediatric Mental Health Program
	<p>Reintegration</p> <p>Site-Specific Implementation</p> <ul style="list-style-type: none"> Socios en Salud Residential Support Homes PIH Liberia Mental Health Homeless Support Zanmi Lasante: The Lived Experience of Psychosis PIH Malawi: The Lived Experience of Psychosis

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The PIH Cross-Site Mental Health Matrix to Achieve Universal Health Coverage is a planning tool to expand service delivery and model effective implementation of mental health services at national referral hospitals, district hospitals, health centers, and community levels. Based on insights from all eleven of PIH’s care delivery sites, it highlights the types of activities that should be prioritized when designing and implementing sustainable mental health programs.

PIH Mental Health Service Planning Matrix to Achieve Universal Health Coverage

The planning matrix is divided into three phases, and features three cross-cutting themes.



Online Resource Library

www.pih.org/MHMatrix

Mentorships & Case Clinics

The case clinics were implemented as an opportunity to share the difficulties faced while implementing mental health programs.

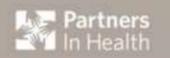
Case Clinic: PIH Lesotho

Engaging stakeholders in the implementation of mental health services



Case Clinic: Compañeros En Salud

Trabajadoras comunitarias de salud mental en la Sierra Madre de Chiapas



Case Clinic: Socios En Salud

Implementación de un Programa de Capacitación en Intervenciones en Salud Mental virtual en un contexto Semi-Urbano



Case Clinic: PIH Liberia

Engaging community members in mental health programs



Taking advantage of the knowledge and experience gained by PIH sites across the world, teams prepare presentations aimed to share their implementation experience and challenges, ask questions, and receive suggestions on how to overcome them

PIH Liberia - REINTEGRATION

Summary of the program, key activities and accomplishments for Liberia

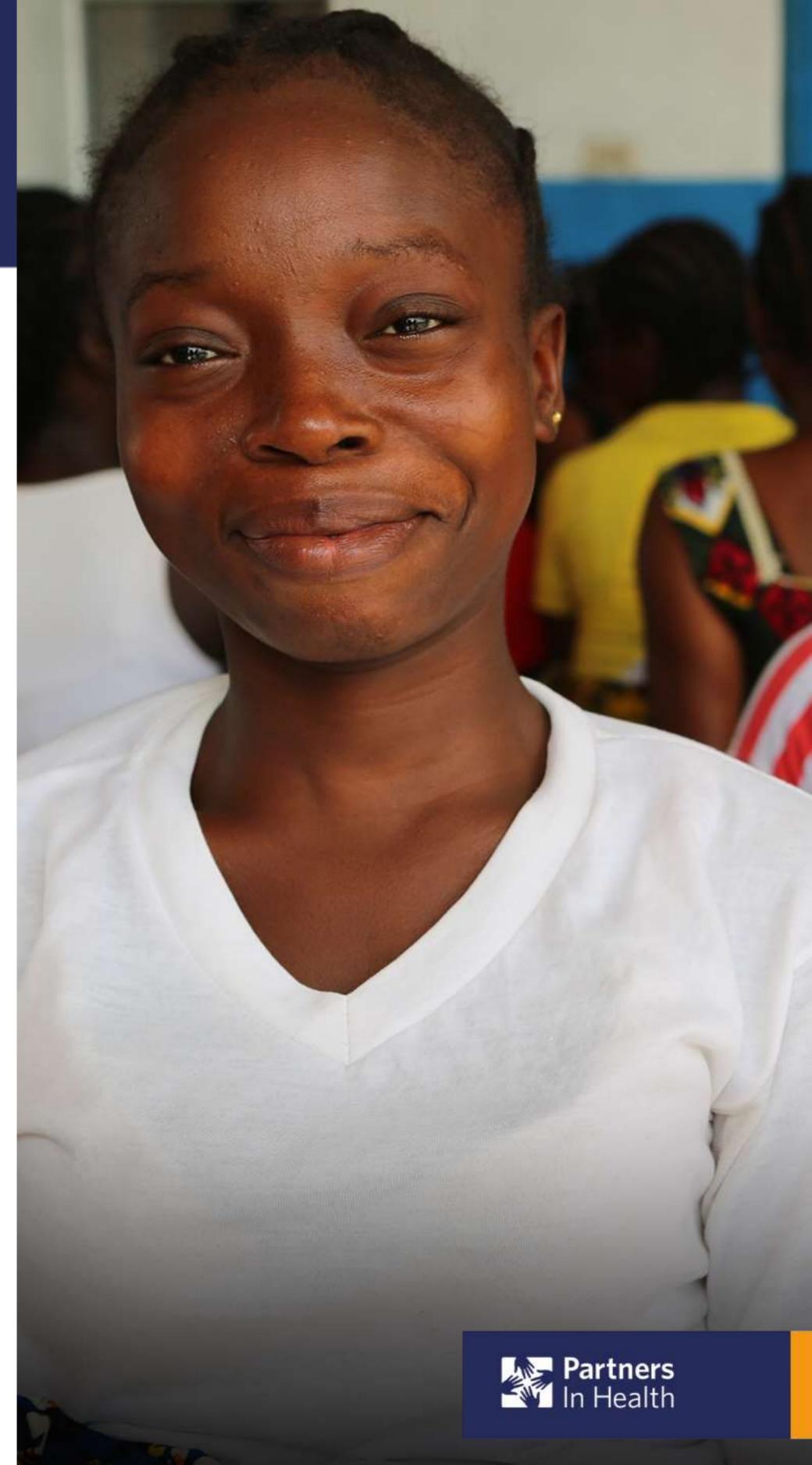
PIH Liberia focused on the REINTEGRATION component of the Value Chain. They established psychosocial rehabilitation groups with peers and caregivers of people with severe mental health conditions aimed to help recovering patients attain an optimal level of functioning, as well as minimize disability by increasing individual's capacity to live successfully in the community.

MAIN ACCOMPLISHMENTS:

- Expansion of data reporting capacity (CommCare app training with health promoters)
- Expanded supervision sessions for service quality attainment
- Capacity Building: Homeless Outreach, psychosocial rehabilitation for vulnerable groups
- Advisory Groups (equity and identifying challenges)

PLANS FOR SCALE AND SUSTAINABILITY:

- Serve as technical partner to the MOH to revise the national mental health policy using the Value Chain
- Expand rehabilitation component of mental health recovery and incorporate into country's mental health system in partnership with the Ministry of Health
- Expand clinical mentorship and medication supply for all of Maryland county
- Streamline sexual & gender-based violence prevention into all activities



Overview of Liberia's Mental Health Service Delivery Value Chain

Summary of the Liberia-site final presentation during the Final Value Chain Workshop in May 2022

- The following slide captures PIH Liberia's final Value Chain presentation during the four-part virtual workshop series beginning in October of 2021 and ending in May 2022.
- PIH Liberia demonstrated how aspects of their site's value chain have changed and improved through the story of a service-user named "Olivia."
- Olivia's experience seeking mental health care was mapped onto the Value Chain template to highlight the patient-level as well as program-level activities that contributed to her care delivery.
- Please see Olivia's story on the next slide.

Liberia Patient Level Example: Meet Olivia

Implementation framework for a mental health system of care



Liberia: 43 y/o housewife, identified by the psychosocial assistant during the outpatient clinic talk. She is in an abusive relationship with her partner and had been frequently presenting to the outpatient clinic with recurrent sexually transmitted infections (STIs). Her family refused to support her leaving the emotionally abusive relationship and she had no other source of income. She explained to the psychosocial assistant that she was constantly worried, not sleeping well, feeling sad and had withdrawn from many activities.

Value Chain Stage

Crisis Response

Prevention

Case-Finding

Assessment

Treatment

Follow-Up

Reintegration/ Recovery

Patient-level
Activities
(at Health Facility
and Community
Level)

Olivia was identified by a trained Mental Health Psychosocial Support Assistant (MHPSSA) during one of the outpatient health talk sessions at JJD

Received prevention messages at the Out-Patient; Referred to the mental health clinic for assessment and intervention

Identified during the health talks held at the outpatient clinic and referred to the mental health clinic

- Screened using the PHQ-9 and the CETA CMF and had high scores for depression.
- Referred to the OB/GYN for further assessment

- Given medications for an STI.
- CETA was provided.
- Food support provided.

- Assigned to a PSSA for weekly CETA sessions.
- Had regular follow-up at the clinic.
- Regular follow up at the OBGYN clinic.
- Family interventions.

- Symptoms have reduced significantly
- She applies self-care strategies to deal with difficult emotions
- Received small cash grant to start up a business
- intimate partner verbal abuse has reduced.

Program-level
support systems

What underlying support systems support the service user in this system of care?

- *Training and supervision systems- MHPSSA cadre of health, health talks, CETA sessions*
- *Task-sharing and task-shifting between MHPSSA and clinicians, MHPSSA supervised by clinician.*
- *Psychosocial interventions for MHPSSA led CETA intervention*
- *Patient-level and program level indicators tracked in CETA*
- *Integrated care- mental health and OBGYN support given at the same health facility*

Summary of tools created under GCC: Community-Based Psychosocial Rehabilitation Curriculum and Training Package

PIH Liberia lead the development and pilot of the Community-Based Psychosocial Rehabilitation Curriculum and Training Package. It champions a human-rights centered approach to social reintegration by placing service users at the center of decision making.

- **TRAINING PROGRAM PURPOSE:** Aims to strengthen the social and behavioral functioning in service users with significant impairments through the provision of skills-development and empowerment focused group sessions.
- **TARGET AUDIENCE:** Service users with more significant impairments in social or behavioral functioning often diagnosed with Schizophrenia, psychosis, bipolar disorder, or epilepsy.
- **TARGET OUTCOMES:** Improve social skills and social functioning among service-users.
- **SUMMARY:** 13-sessions to guide the training activities, step-by-step facilitator instructions and a Facilitator Adaptation Guide.

Community-Based Psychosocial Rehabilitation Curriculum and Training Package

Partners In Health

Across communities in 10 countries, the Partners In Health mental health program establishes safe, effective, culturally-sound mental health care as a fundamental, integrated part of primary care. Like all PIH programs, we work in close partnership with in-country government officials and leading medical and academic institutions to increase and improve mental health care services. PIH is strengthening mental health care services in some of the world's poorest places. We help thousands of patients around the globe, and in so doing prove that high-quality mental health care can and should be available to all people, no matter where they live.

Background

Serious mental illness (SMI) affects more than 4% of the global adult population with an estimated 14 million with bipolar disorder, 20 million globally with schizophrenia, with burden of disease being substantial. We also know that outcomes among those with severe mental illness are tied to recovery of dignity, hope, self-direction, and coherent sense of identity, social relationships and the achievement of quality of life.

Target Audience

Service users with more significant impairments in social or behavioral functioning often diagnosed with Schizophrenia, psychosis, bipolar disorder, or epilepsy.

Overview of the Curriculum and Training Package

Across PIH sites mental health program implementers have expressed a universal challenge among service users seeking mental health services: service users face barriers to social reintegration.

PIH sites have been engaged in Psychosocial Rehabilitation, social reintegration and recovery efforts for decades. Recently, a cross-site steering committee dedicated to Psychosocial Rehabilitation (PSR) created and piloted a human-rights centered curriculum and training package titled "Community-Based Psychosocial Rehabilitation." The outline for this curriculum originated from Inshuti Mu Buzima (IMB), PIH's sister organization in Rwanda, was piloted by PIH Liberia and can be adapted to feel fit the local and appropriate context and population needs.

The curriculum includes 13 training sessions emphasizing social skills strengthening through role-play and co-facilitator modeling in each session.

Core Metrics

- Improve social skills and social functioning among service users
- Ongoing accompaniment and monitoring of social and vocational goals established by service users.

Core Values

- Aims for people to feel hopeful and empowered about their future.
- Champions a human-rights centered approach to social reintegration by placing service users at the center of decision making.
- Uses a team approach: Each session is co-facilitated by a provider and a service user.
- Uses the recovery model of care, considering the living, working, and social environment of each person.
- Strives to help reduce prejudice and foster social inclusion.
- Aims to strengthen a person's skills to live the life they want to live. This includes social skills, living skills, and vocational skills.

What is included in the training package?

- PSR Overview Slide Deck.
- Facilitator Adaptation Guide.
- 13 Training Sessions: Slides to guide the sessions and step-by-step facilitator instructions.
- Recorded Facilitator Orientation.

Session Topics:

- Introduction to the Course, Human Rights and Group Norm Setting.
- Strength and Skill Identification and Goal Setting.
- Psychoeducation.
- Stigma and Advocacy.
- Treatment.
- Relapse Prevention.
- Healthy Lifestyle Management.
- Substance Use.
- Community Awareness for the General Public.
- Gender-Based Violence.
- Responding to Agitation and Distress.
- General Wellness Education for Caregivers.
- Resiliency and Social Skills.
- Livelihood and Vocational Skills.

For access to the full training materials, please email xsitementalhealth@pih.org

Partners In Health
www.pih.org

Socios En Salud - TREATMENT

Summary of key activities and accomplishments for Peru

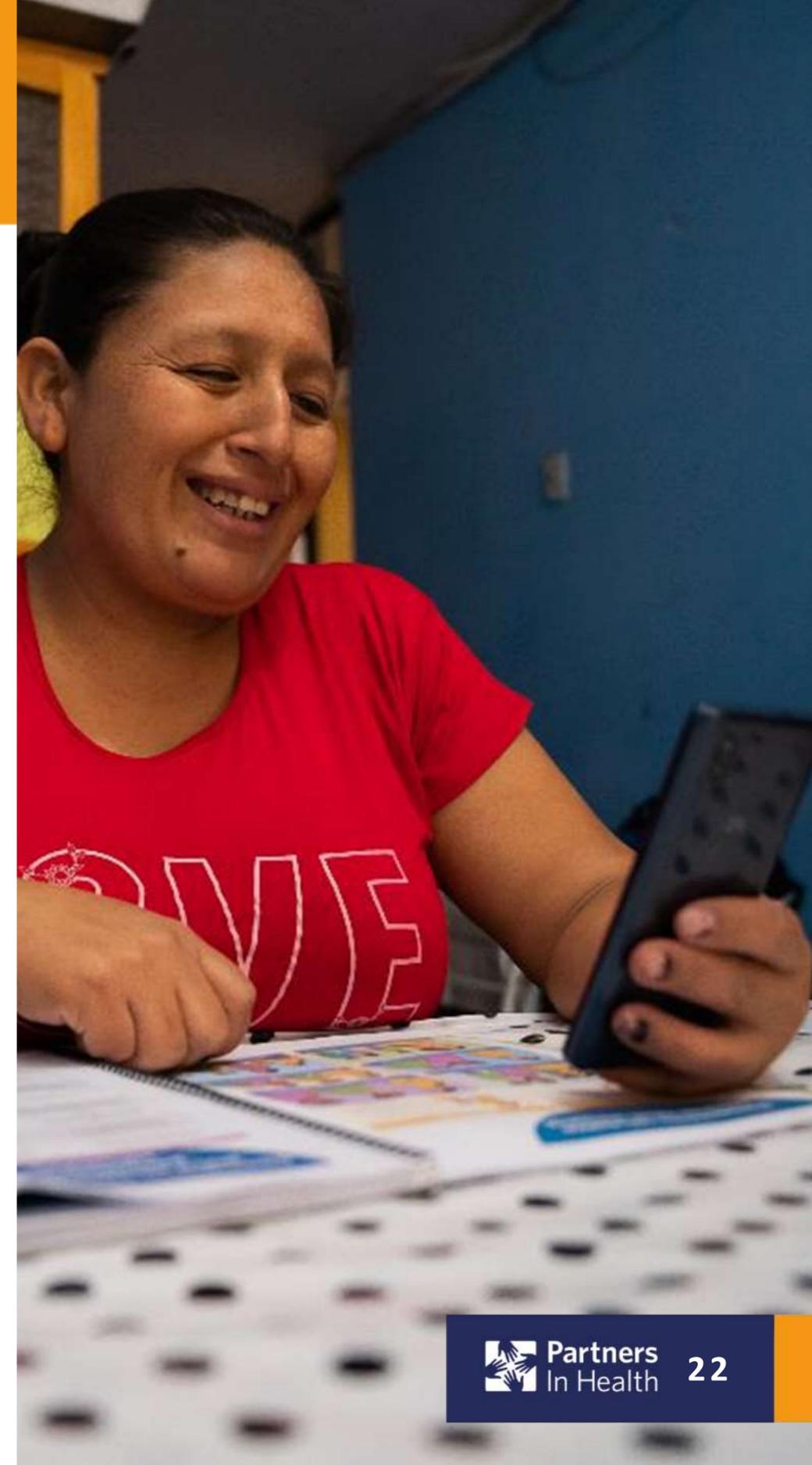
SES is concentrating its efforts on strengthening the treatment component of its Value Chain by expanding its community-based approach to care for people suffering from common mental health conditions. They are focusing on providing psychological services such as PM+, Thinking Healthy (THP), and Foundational Helping Skills (FHS), through in-person and virtual platforms.

MAIN ACCOMPLISHMENTS:

- Training courses designed and implemented for the first time in a virtual platform
- Strengthened community-based psychological interventions and supervision structures
- Nationally scaled PIH's adapted intervention and curriculum
- PM+ course successfully trained 41 psychologists
- 82 CHWs were trained in Thinking Healthy
- Partnership with MOH to develop the National Maternal Mental Health Care Training Curriculum
- Advisory group with Service Users and Caregivers

PLANS FOR SCALE & SUSTAINABILITY:

- Expand the existing Maternal Mental Health Curriculum and intervention to include the Thinking Healthy Program, including a training for Health Care Providers
- Obtain the Ministry of Health's approval to include the Thinking Healthy intervention as a part of the national maternal health clinical guidelines



Overview of Peru's Mental Health Service Delivery Value Chain

Summary of the Socios en Salud, PIH Peru's, final presentation during the Final Value Chain Workshop in May 2022

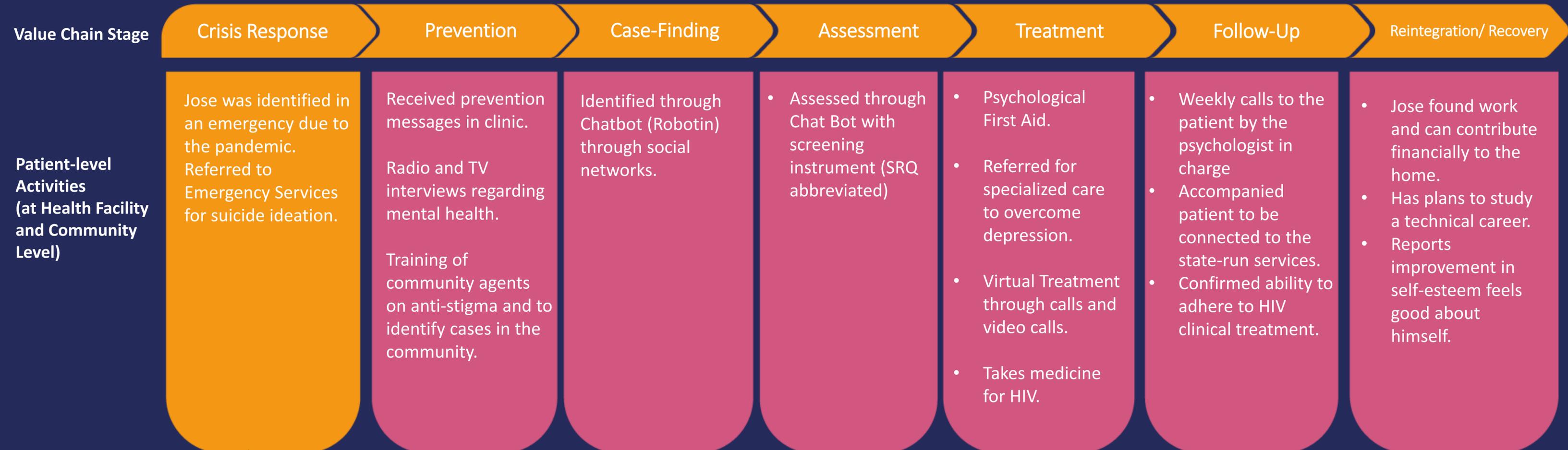
- The following slide captures Socios En Salud's, PIH Peru's, final Value Chain presentation during the four-part virtual workshop series beginning in October of 2021 and ending in May 2022.
- Socios En Salud, PIH Peru, demonstrated how aspects of their site's value chain have changed and improved through the story of a service-user named "Jose."
- Jose's experience seeking mental health care was mapped onto the Value Chain template to highlight the patient-level as well as program-level activities that contributed to her care delivery.
- Please see Jose's story on the next slide.

Peru's Patient Level Example: Meet Jose

Implementation framework for a mental health system of care



Peru: 20 y/o young man who lives with his father, who is a bus driver, and his mother who is a housewife and does not work. He has concerned about his family's economic situation. Jose was identified via the Chatbot, Robotin, during the pandemic. He is undergoing HIV treatment, experiences body pains, nausea and worries about his health. He had suicide ideation during the pandemic. Was referred to specialized mental health care in North Lima. He began treatment and was followed up with a psychologist on call weekly.



What underlying support systems support the service user in this system of care?

Program-level support systems

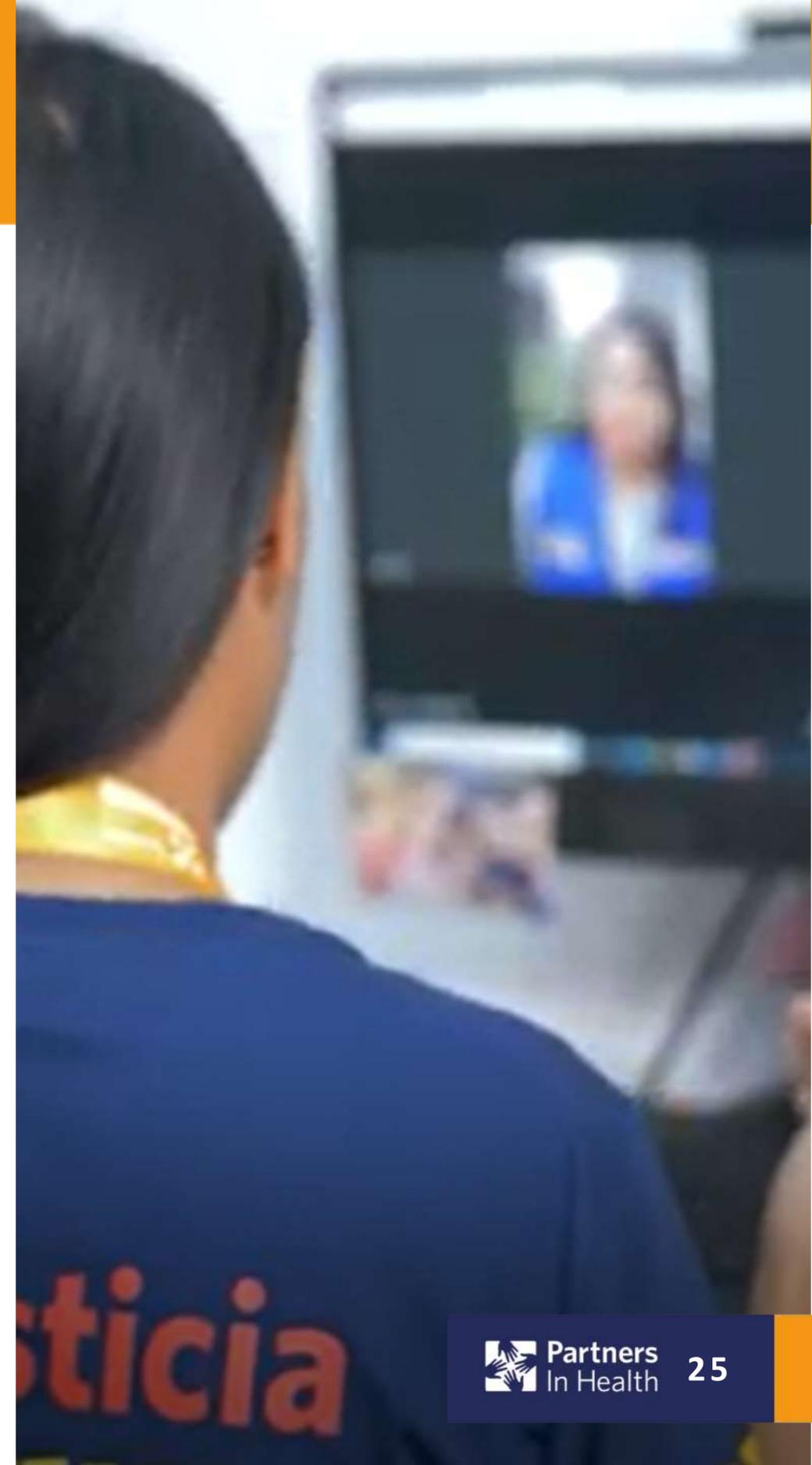
- Strong Partnerships with the Ministry of Health: Creating Links for Patient Referral
- Partnerships with local health centers for patient care.
- Program planning and partnerships with IT and Software Development to create Robotin the Chatbot
- External Engagement to publicize Chatbot Robotin through social media channels so prospective service users can be reached.
- Community Mental health Planning- to ensure referrals, coordination and care between SES/PIH and ministry-led health facilities.

Summary of tools created under GCC:

Virtual training courses in psychological interventions

SES has developed two virtual courses to train health workers in mental health interventions designed by WHO, Thinking Healthy (THP) and Problem Management Plus (PM+). Both include an additional course called Foundational Helping Skills (FHS), training participants in basic skills needed to provide psychological treatment.

- **TRAINING PROGRAM PURPOSE:** Expand mental health service delivery capacity through the implementation of virtual trainings on mental health interventions across the country.
- **TARGET AUDIENCE:** Non-specialized (THP, FHS) and Specialized Health Personnel (PM+, FHS).
- **TARGET OUTCOMES:** All courses are provided through an asynchronous format to better adapt to the schedule of each participant. Classes include videos and written material. A team of specialists monitor progress to identify and address any issues with the platform or content.
- **SUMMARY:** THP consists of 5 modules, PM+ 10 topics, and FHS 4 sections (8 competencies).



PIH Mexico, *Compañeros en Salud*-Treatment

Summary of the program, key activities and accomplishments for Mexico

CES is focusing on the TREATMENT component of their Value Chain implementation through the scaling of their community based psychological services with interventions such as PM+, psychoeducation groups, and women's circles.

MAIN ACCOMPLISHMENTS:

- Increased non- specialist provider competency via capacity building, supervision, and accompaniment
- Expanded mental health delivery capacity by training 15 "Cuidadoras de Salud Mental"
- PM+ program implemented
- Women's Circles curriculum designed through a participatory process by women from the communities
- Training of medical staff working in maternal health facilities on mental health service delivery
- Team growth from 5 Cuidadoras to 9 Cuidadoras, and from 2 clinical supervisors to 3

PLANS FOR SCALE AND SUSTAINABILITY:

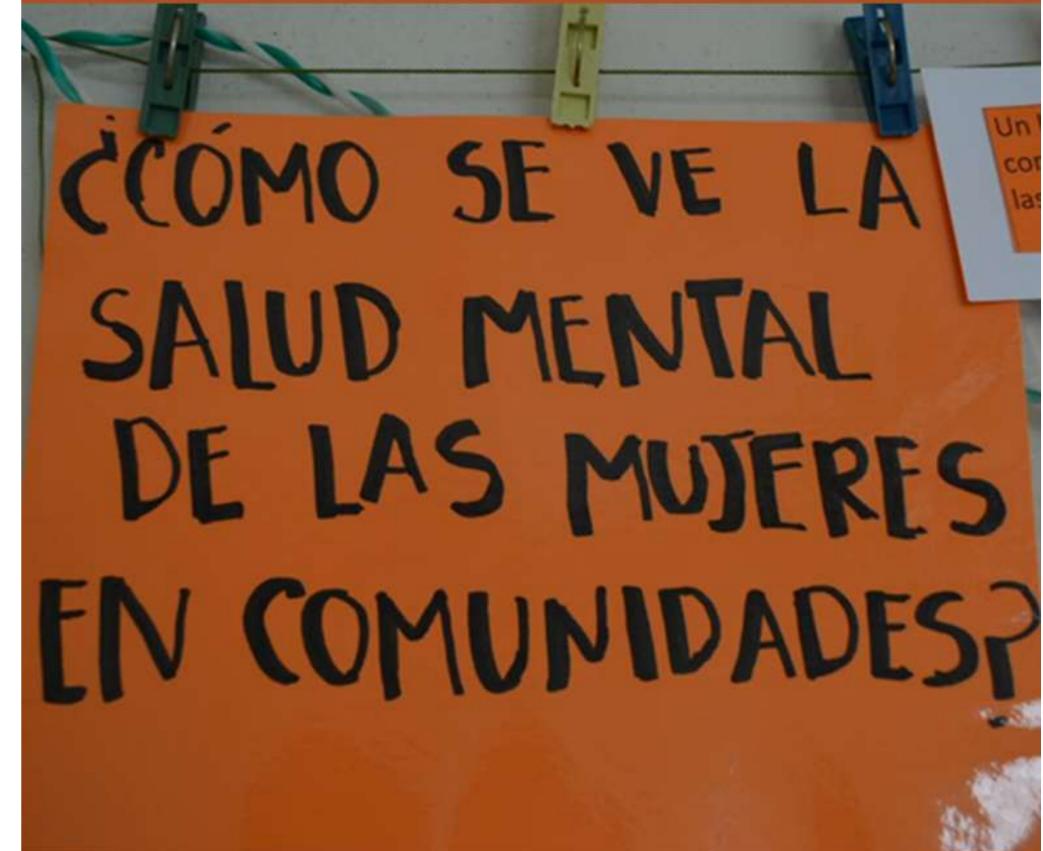
- Continuous training of non-mental health specialists
- Providing care for Substance Use condition, participatory needs assessment & local collaborations
- Pilot of a transdiagnostic intervention during individual sessions and for an alternative masculinities group facilitated by a male Cuidador de Salud mental
- Enriching individual and group sessions through conflict management and restorative process skills learned by Cuidadoras, their supervisors, and acompañantes



Overview of Mexico's Mental Health Service Delivery Value Chain

Summary of the Compañeros en Salud, PIH Mexico's, final presentation during the Final Value Chain Workshop in May 2022

- The following slide captures Compañeros en Salud's, PIH Mexico's, final Value Chain presentation during the four-part virtual workshop series beginning in October of 2021 and ending in May 2022.
- Compañeros en Salud demonstrated how aspects of their site's value chain have changed and improved through the story of a service-user named "Sarah."
- Sarah's experience seeking mental health care was mapped onto the Value Chain template to highlight the patient-level as well as program-level activities that contributed to her care delivery.
- Please see Sarah's story on the next slide.

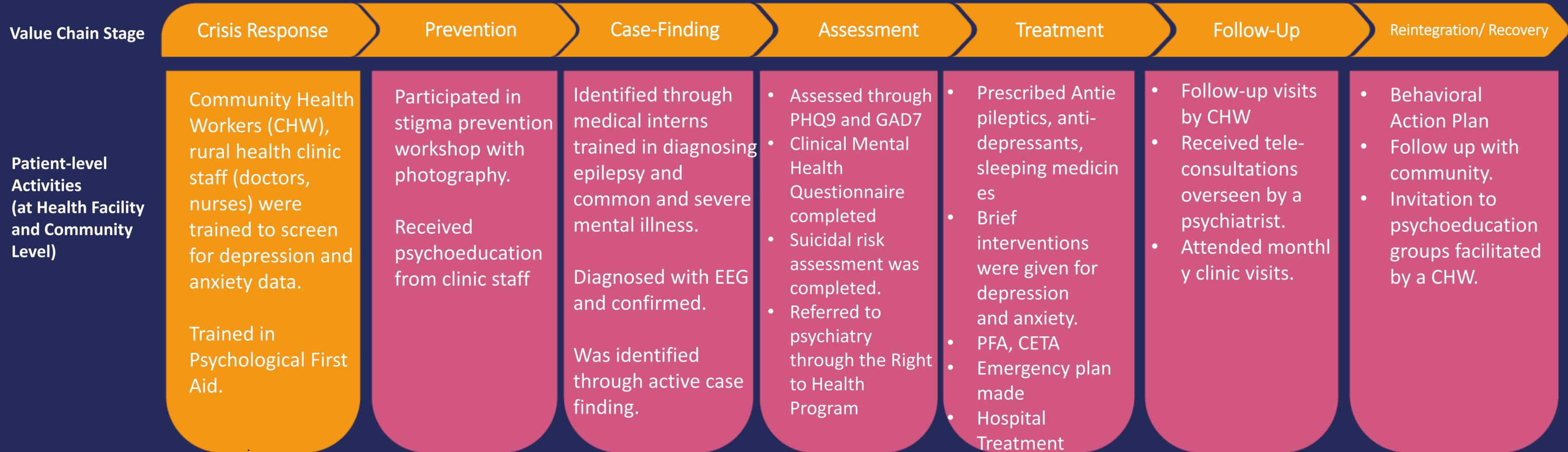


Mexico's Patient Level Example: Meet Sarah

Implementation framework for a mental health system of care



Sarah: 26 y/o female who has been diagnosed with epilepsy since the age of 7. She lives in a marginalized community with her siblings and both parents. From childhood she was exposed to sexual trauma, food insecurity, domestic violence and a disabling environment. She had her first depressive episode at age 18. In addition, generalized anxiety disorder with panic attacks and functional neurological disorder were added. She has had suicide attempts, panic attacks and epileptic seizures.



What underlying support systems support the service user in this system of care?

Program-level support systems

- **Training and Supervision Systems:** Competency-based training and supervision system for medical interns, weekly CHW supervision, CHW Continuing Education, CETA weekly Supervision
- **Strong Government Partnerships-** Agreement between the Ministry of Health and CES to work in the rural clinics
- **Partnerships and Community Mental Health Planning:** Right to Health partnership including food and transportation support, accompaniment for clinical and psychoeducation visits.
- **Psychoeducation and social support** to family and support persons.

Summary of tools created under GCC: Women's Circles Curriculum

Compañeros En Salud has developed a training alongside four Community Mental Health Workers, named Cuidadoras, to promote mental health with a feminist perspective in rural communities in the Sierra Madre of Chiapas.

- **TRAINING PROGRAM PURPOSE:** To provide women with culturally appropriate mental health services that enable community cohesion
- **TARGET AUDIENCE:** Women from rural communities interested in improving their mental health or who want to acquire abilities to support other people
- **TARGET OUTCOMES:** Strengthen the mental health of women in a culturally appropriate way and with a gender perspective so they can face adversities. Debunk the myth of individuality when it comes to gender-based violence and inequity, generating critical thinking focused on social structures and therefore creating relationships of sisterhood
- **SUMMARY:** 8 sessions facilitated by Cuidadoras using popular education methods to promote mental health with a feminist perspective with the support of a community psychologist



PIH Lesotho- Crisis Response

Summary of key activities and accomplishments for Lesotho

PIH Lesotho focused on the CRISIS RESPONSE component of the Value Chain. The PIH Lesotho mental health program is integrating depression care into the multi-drug resistant tuberculosis (MDR-TB) program, and treatment supporters working in the community to provide psychological care.

MAIN ACCOMPLISHMENTS:

- Effective and comprehensive COVID-19 response with mental health support for communities and staff
- 157 individuals with depression or anxiety received counseling and 25 received Psychological First Aid
- 335 Community Health Workers were trained in Psychological First Aid
- Incorporation of several tools into its regular service delivery platform, making future monitoring and evaluation activities more productive and accurate

PLANS FOR SUSTAINABILITY & SCALE UP:

- Continue working with Ministry of Health partnership as the lead partner on the country's national technical working group on a mental health policy and strategic plan
- Establish and strengthen integrated mental health services at PIHL rural initiative supported facilities and Berea health centers, including around crisis response
- Leverage lessons learned in Berea to reform three other PIH- supported districts across Lesotho
- Train nurses to include psychoeducation into their general health education and outreach
- Strengthen monitoring, evaluation, and quality systems for mental health
- Support the government to establish affordable, integrated, and decentralized mental health services



Photo source: Psychiatric Nurse provides psychoeducation, PIH Lesotho

Overview of Lesotho's Mental Health Service Delivery Value Chain

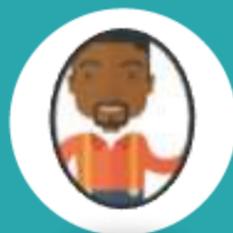
Summary of PIH Lesotho's final presentation during the Final Value Chain Workshop in May 2022

- The following slide captures PIH Lesotho's final Value Chain presentation during the four-part virtual workshop series beginning in October of 2021 and ending in May 2022.
- PIH Lesotho demonstrated how aspects of their site's value chain have changed and improved through the story of a service-user named "Mosito."
- Mosito's experience seeking mental health care was mapped onto the Value Chain template to highlight the patient-level as well as program-level activities that contributed to her care delivery.
- Please see Mosito's story on the next slide.

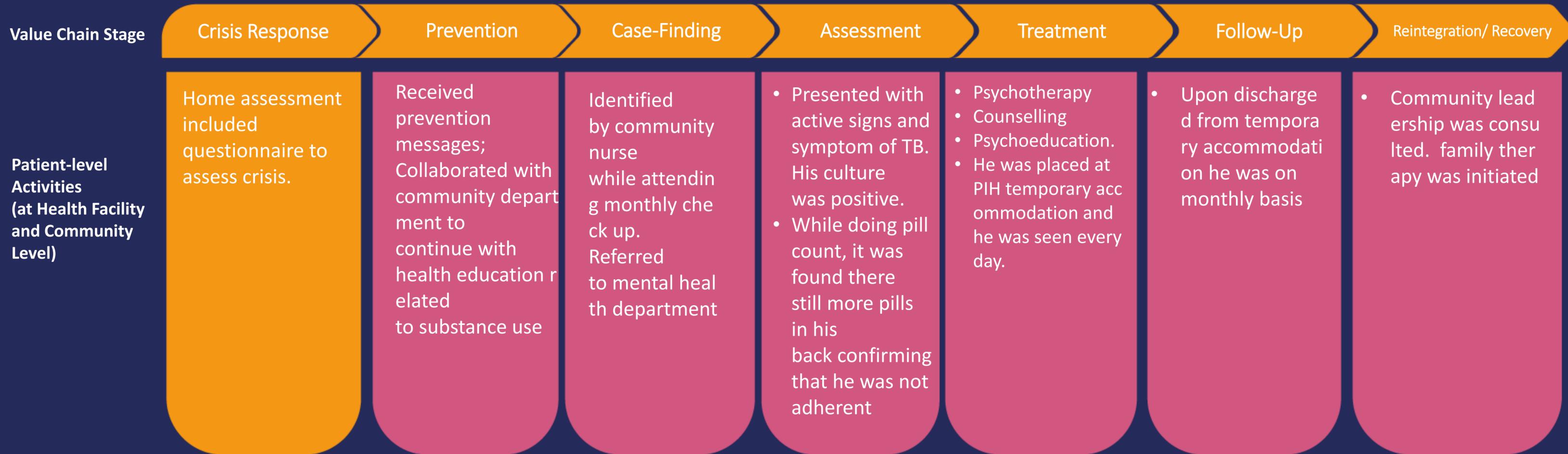


Lesotho's Patient Level Example: Meet Mosito

Implementation framework for a mental health system of care



Lesotho: **38 y/o male** was diagnosed with MDRTB on 17/07/2020. Due to his clinical condition at that time he was hospitalized and discharged on 29/10/2020 (3 months later). He continued to come to his monthly scheduled check ups however he continuously loss weight. On 05/02/2021 he present with active sign and symptom of TB. His pill bag still contain more tablets, and culture was positive again. Community nurse referred him to mental health department



What underlying support systems support the service user in this system of care?

- Strong Partnerships with the Ministry of Health: Creating Links for Patient Referral
- Partnerships with local health centers for patient care.
- Training and supervision systems supported prevention, case-finding, assessment, treatment, through reintegration activities
- Integration of Depression Care through TB services

Program-level support systems



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