



MHAF  
Maldives

# Implementing WHO's mhGAP-based training in the Maldives and monitoring its outcome

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# Mental Health Awareness Foundation (MHAF)



- NGO based in the Maldives (since August 2014)

1

To provide mental health awareness in the Maldives

2

To work towards improving mental health awareness and empowering women in the Maldives, their human rights, advocacy

3

To work towards improving mental health awareness in Children and Young People in the Maldives

4

To work towards decreasing the stigma associated with mental disorders

5

To advocate for people with mental disorders and their human rights



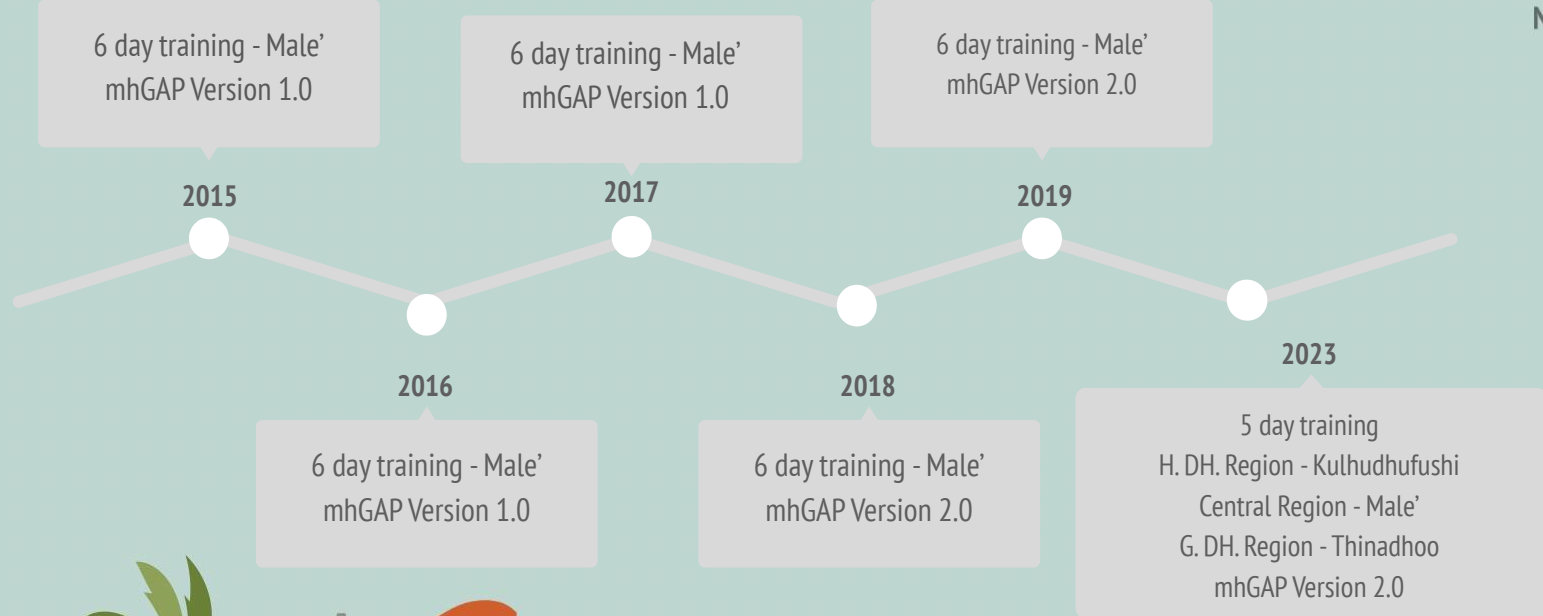
# WHO's mhGAP Training

- mhGAP-IG for mental, neurological and substance use (MNS) disorders in non-specialised health settings
- Version 1.0 and 2.0 based training programmes
- Valuable tool: people with MNS conditions and their families in low and middle-income countries



**mhGAP**

# MHAF mhGAP Trainings



29-30 Participants

Health Professionals

Non-Health  
Professionals

Nurses

Doctors

Community Health  
Workers

Counsellors

Social Workers

Supervisors from HPSN

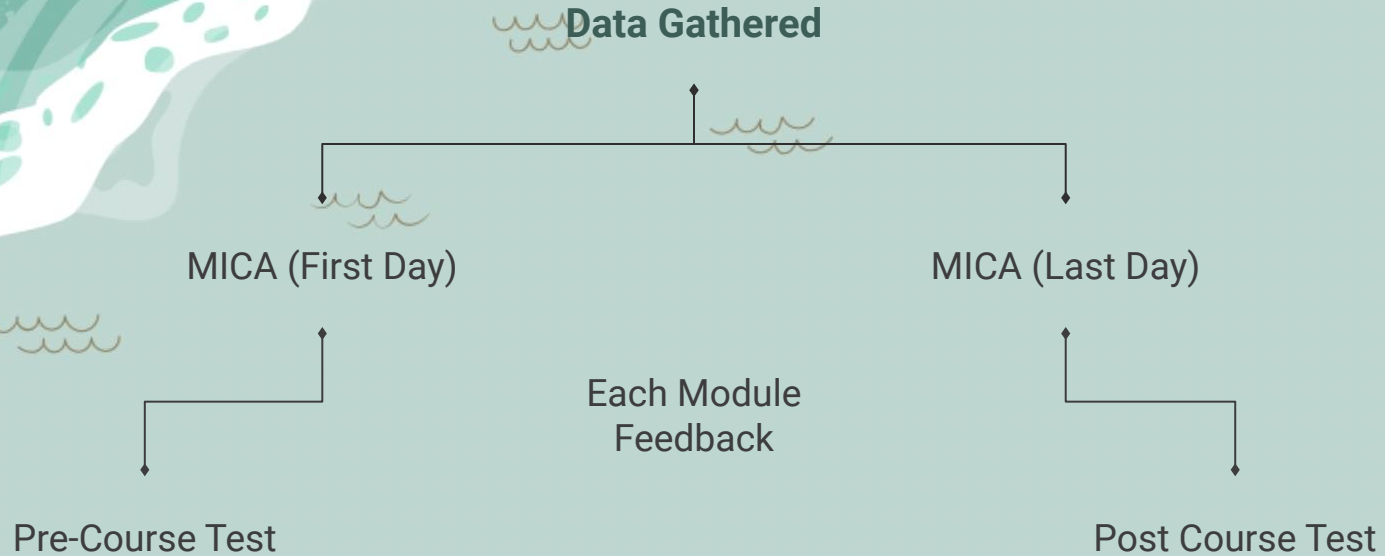


## Purpose

1. Evaluate a change in participants attitudes towards mental illnesses
2. Evaluate a change in participants knowledge of mental illnesses



# Methodology

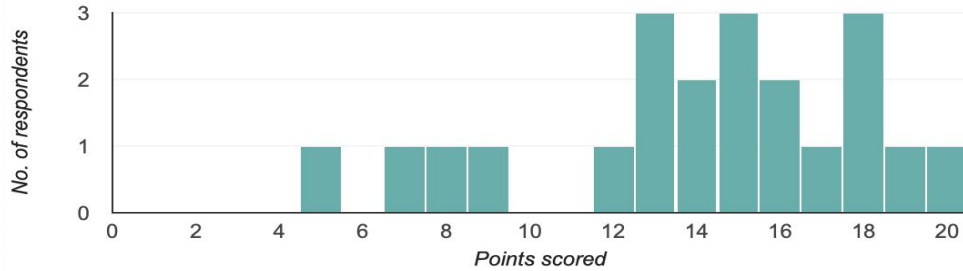


\*Additional post-training  
questionnaire

# Results – Pre/Post-course tests

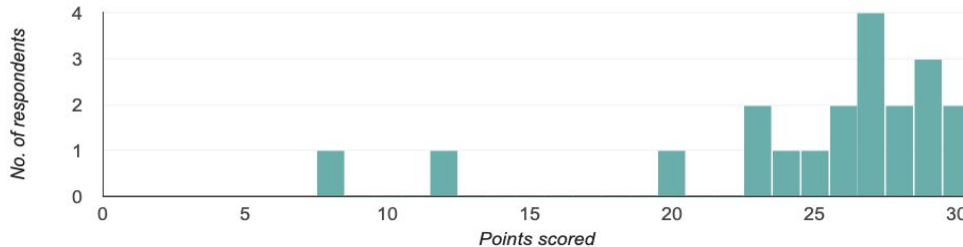
## H. DH. Region Pre-Course Test

Total points distribution



## H. DH. Region Post-Course Test

Total points distribution

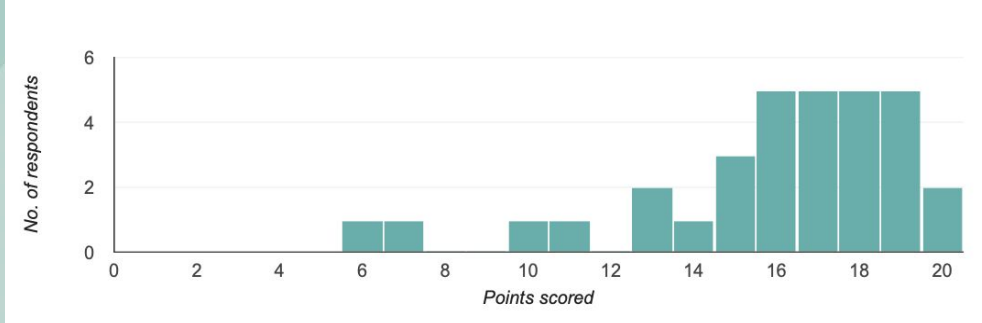




# Results

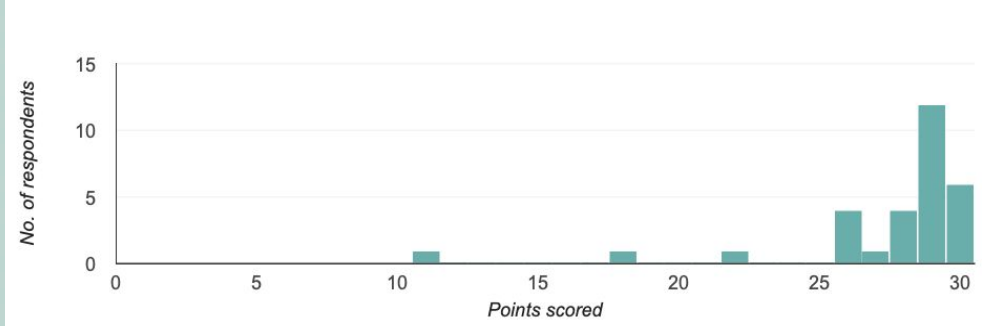
## Central Region Pre-Course Test

Total points distribution



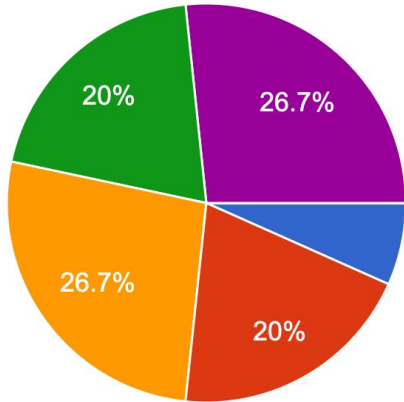
## Central Region Post-Course Test

Total points distribution

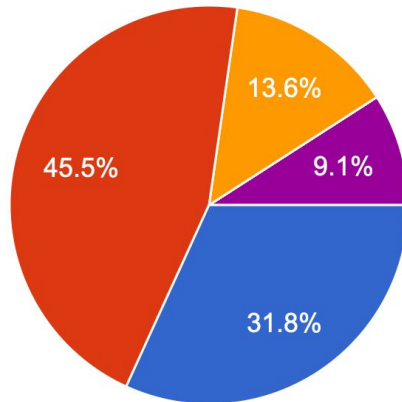


# Results - MICA

People with a severe mental illness are dangerous more often  
.than not



DAY 1




LAST DAY

H. DH. Region

- Strongly disagree
- Disagree
- Somewhat disagree
- Somewhat agree
- Agree
- Strongly Agree

LET'S TALK  
ABOUT  
MENTAL  
HEALTH

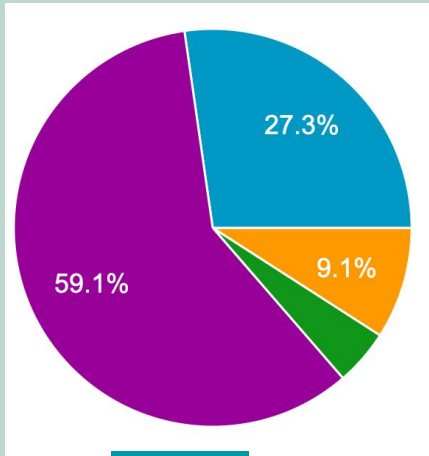


An illustration of two people sitting on the ground and talking. A man in a white shirt is on the left, and a woman in a red and yellow dress is on the right. They are positioned in front of a large, stylized graphic of a brain with the text 'LET'S TALK ABOUT MENTAL HEALTH' written across it.

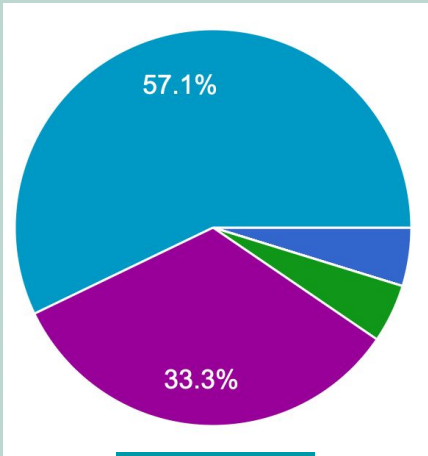


# Results - MICA

If a colleague told me they had a mental illness, I would still want to work with them



DAY 1



LAST DAY

GDh. Region



- Strongly disagree
- Disagree
- Somewhat disagree
- Somewhat agree
- Agree
- Strongly Agree



# Discussion

The following recommendations are based on the training experiences during the project.

- **Further contextualization** of mhGAP training materials be undertaken with the use of local stories and context with lived experiences
- It is recommended to **develop videos in Dhivehi** for a more optimal learning experience
- The use of **Dhivehi to deliver content** appeared to further enhance the understanding and confidence of trainees while increasing the utility of the training and is encouraged

- It is recommended on **building psychosocial skills** for treatment for general health professionals while more detailed sessions may be provided separately for groups of medical professionals.
- It also recommended that trainers be provided more **training on delivery of training,** and the trainees be given the opportunity to use the **training in their workplace** when they go back after the training.



- It is also recommended that **individual and group supervision** be provided for training to support the trainees as this was identified as another major barrier for optimum use of the training.
- Establishing and ensuring a **monitoring and evaluation mechanism** for supervision and outcome from the mhGAP programmes conducted.



# Limitations

- Paper written by co-founders of MHAF therefore conflict of interest is within writing a paper related to direct training organized or facilitated by MHAF.
- Lack of response for post-training questionnaires sent via emails.



## Conclusion

Apart from imparting and enhancing their knowledge regarding MNS conditions, **the participants were geared to better attend MNS conditions at their respective workplaces/regions.** It also provided an opportunity in gaining valuable **insight into the diverse perception of MNS conditions and perspectives about approach and management of the cases, along with the potential “gaps” in different regions of the Maldives** – which is invaluable in terms of further contextualizing mhGAP for the Maldives.





## Conclusion

mhGAP-based trainings have **the potential to further improve the clinicians' attitudes towards mental illness** and also the knowledge of identifying MNS disorders and signposting appropriate management of these conditions according to the level of the participants profession in the Maldives where further work is required at primary health care level for the management of MNS.



LET'S TALK  
ABOUT  
MENTAL  
HEALTH

Thank you