Assessment of Training and Group Activities for Religious Leaders and Traditional Healers Related to Mental Health Services Access and Use

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I. Support and Strength

This assessment assesses existing community and family practices that promote resilience and recovering and informs next steps in the Supporting Psychosocial Health and Resilience in Liberia project. Activities under Component 1, Support for Intermediate Psychosocial/ Mental Health Impact of the Ebola Crisis and Component 2, Support to Build Long-Term Psychosocial Health and Resilience at the Individual and Community Level are being evaluated through Key Informant Interviews. We use an interview tool designed to get information from religious leaders and traditional healers. The selection of the key informants will be drawn from the all of the individuals who participated in trainings and, or group meetings.

This assessment component serves as an important tool to understand the impact of working to support immediate psychosocial/mental health following the Ebola crisis. It will focus on the goals of community support activities that promote community healing and sticking togetherness. It also examines the impact of community-level "Anti-stigma activities." The assessment will also look at how religious leaders and traditional healers' practices have changed as a result of training initiatives in Margibi and Monserrado counties.

These trainings sought to teach religious leaders and traditional healers to identify individuals experiencing acute stress, and identify and make appropriate referrals. Data gathered from the interviews will be analyzed to determine the effectiveness of the training.

Interview Script:

(Greetings, Introductions)

"Thank you for taking the time to join this study on how religious and traditional leaders help people living with mental illness. This is to see what has happened since you were part of: 1. World Health Day/World Mental Health Day activities; 2. Mental Health anti-stigma training; and/or 3. Mental Health training in recognizing, identifying and supporting people facing acute stress and to refer them when they need help. The interview will take between 30 minutes to one hour. Taking part in this study is voluntary, nobody can force you, it is by your own free will. You do not have to answer any question that you don't want to answer, and you can stop the interview at any time you wish. We are asking you these questions in secret and your name will not be connected to your answer after we collect your answers. At all times, every effort will be made to protect your privacy. All the answers will be put in a separate, secured location." You may not benefit directly from this interview but the answers you give will help us make the work better next time.

"Are you willing to participate?" Y/N

"Do you have any questions before we begin asking you the questions?"

II.	Training Did you take part in any of in the following:			
	Training(s) on anti-stigma, identification, and referral in Montserrado and Margibi counties, and how many times did you participate?			
	Monthly Group Meetings, and how many times did you participate?			
	Planning Meetings for Awareness Days, and how many times did you participate?			
	The training was about reducing Stigma Y/N			
	The training was about knowing the signs and symptoms of mental illness Y/N			
	The training was about showing people how to get help with mental health challenges Y/N			
III.	Respondent Information			
Intervi	ewer Name:			
Respo	ndent Code:			
Respo	ndent Age:			
Respo	ndent M/F:			
Which	religious community does the respondent represent:			
Which	neighborhood does the respondent represent:			
IV.	Interview Questions			
Likert	Likert Scale Questions			

Please respond to the following statements based on a 1 – 5 scale with 1 meaning "I strongly disagree" and 5 meaning "I strongly agree" as a result of participating in World Health and World Mental Health Day, Mental Health Anti-stigma training, and/or Mental Health Training.

Key: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree The county health team's mental health services are more integrated (it is inside) with the community. **Strongly Disagree** 2 **Strongly Agree** Community members feel they benefit from the county health team's mental health services. **Strongly Disagree** 1 3 5 **Strongly Agree** The way that the county health team joins and carry out mental health services is correct. **Strongly Disagree** 1 2 3 5 **Strongly Agree** The county health team collaborates (work) well with community members **Strongly Disagree** 1 2 3 5 **Strongly Agree** The county health team provides different mental health services to community members. (for example: mental health crisis support, access to health care workers with training in mental health, counseling, trained social workers that can make sure people get community support services) **Strongly Disagree Strongly Agree** 1 2 3 5 As a religious or traditional leader, do you have any of the following skills related to mental health

services access for community members? Please circle all that apply

Skills:

1.	r can identify individuals (people) experiencing acute mental stress
2.	I can direct individuals (people) to community health service resources for help
3.	I can tell between the different types of mental health issues
4.	I can provide counseling
5.	I can mobilize the community to support mental health programs at the local and county level
6.	I can educate and work to reduce stigma
7.	Other
	Other skills you mentioned, which is the most effective/working good?
Of the	
Of the	skills you mentioned, which is the most effective/working good?

Open Ended Questions:
What are some of the <u>teachings</u> from religious and/or traditional sources (Bible, Koran, Other) that you use to address the mental health needs of community members?
Follow-up? Can you please tell me exact references from the text and/or source?
What are some of the skills from religious and/or traditional sources (Bible, Koran, Other) that you
use to address the mental health needs of community members?
Follow-up? Can you please tell me exact references from the text and/or source?

Are there differences between religious and/or traditional skills you use to address the mental health in individuals and the skills presented at the training? Y/ N
What are some differences between religious and/or traditional skills you use to address mental health and the skills presented at the trainings?
Can you please list at least three?
1.
2.
3.
How do you identify individuals experiencing acute stress?

How many persons have you referred through the county's referral mechanisms?				
	We regard a completed referral as one where you referred someone to the county mental health provider and that person went and the provider saw that person. With that understanding:			
a)	how many persons would you say you have referred to the county mental health provider since the training?			
b)	How many persons with acute stress or other mental health problems have you identified?			
c)	How many persons with other mental health problems have you identified?			
Did	you work with or relate to the mental health provider? Y/N			
Did you talk to, text or see the mental health provider? Y/N				
Wh	at other ways did you work with or relate to the mental health provider? (List up to 3 ways)			
	2.			
	3.			
Wh	at services did the persons you referred get?			

How would you describe your role related to mental health services for people in your congregation, your church, your mosque before your taking part in the training event?

How would you describe your role related to the access to mental health services after taking part in the training event?
One of the challenges previously identified related to access to mental health services is stigma placed on those seeking services. What have you done/seen that is working in reducing stigma?
If you could change one thing about the way people get mental health services what would you change?

If you could change one thing about the way mental health services are <u>provi</u> change?	<u>ded</u> , what would you
How did this training(s) effect/impact you personally?	
What else would you like to share with us?	

V. Thank You, Wrap Up

Thank you very much for your participation and contribution to a better understanding of access to mental health services in the communities and the role of religious and traditional leaders, we will try to share the results, any additional questions can be made of the Carter Center mental health program staff.