



**AAMH**  
Asia Australia Mental Health

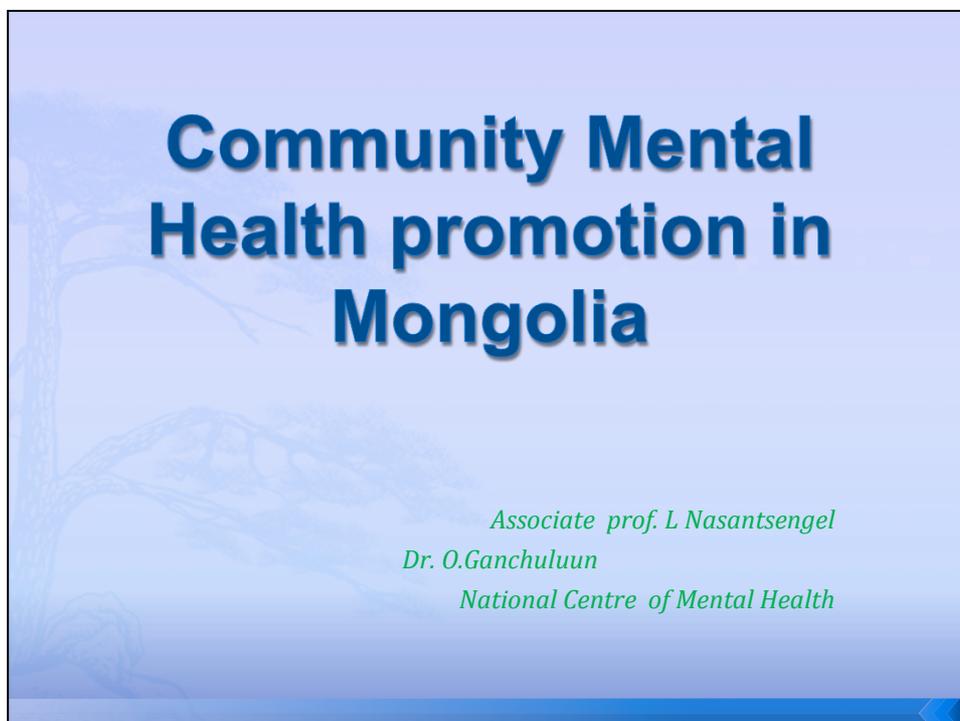
## Partnerships for Community Mental Health

Part 3 – Chair: Professor Helen Herrman *Professor of Psychiatry, The University of Melbourne*

### Mongolia

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Logos at the bottom: St Vincent's (Continuing the Mission of the Sisters of Charity), Asialink (The University of Melbourne), THE UNIVERSITY OF MELBOURNE, Australian Government AusAID, Australian Government Department of Health and Ageing.



# Community Mental Health promotion in Mongolia

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National Centre of Mental Health*

## Mental health policy in Mongolia

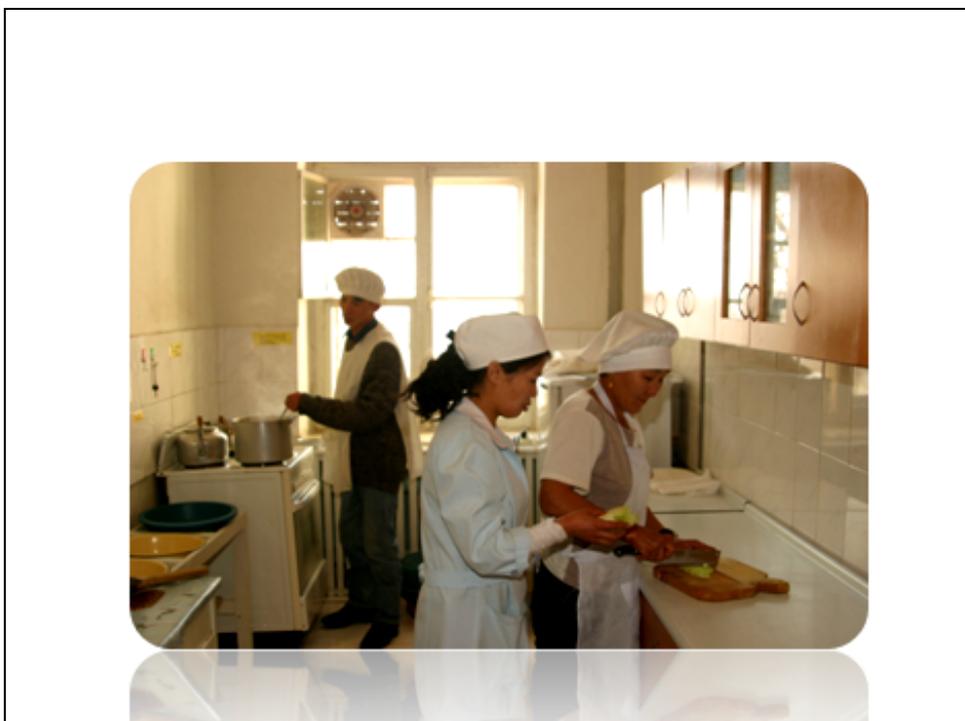
- Mongolia has a Mental Health Law (adopted in 2000), a National Mental Health First Program 2002-2007 (formulated in 2002), a National Mental Health Second Program from 2010-2019 (formulated in 2009). **/Health insurance system /**
- Since 1997, Mongolia has collaborated with the WHO to implement community based mental health care.
- At the tertiary care level, the National Center of Mental Health has also established a community mental health care team and Psychosocial Rehabilitation Department since 2000.

## The psychosocial rehabilitation in National Centre of Mental Health

We have following 25 types of PSR:

- |                    |                                 |
|--------------------|---------------------------------|
| ➤ Musical therapy  | ➤ Dancing                       |
| ➤ Picture drawing  | ➤ Psychodrama                   |
| ➤ Sewing           | ➤ Excursions                    |
| ➤ Embroidering     | ➤ Agriculture                   |
| ➤ Physical culture | ➤ Fabric treatment              |
| ➤ Book reading     | ➤ Work skills upgrading and etc |
| ➤ Food preparing   |                                 |
| ➤ Game playing     |                                 |



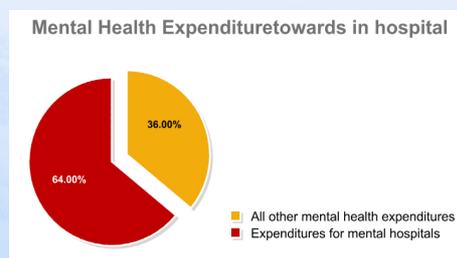
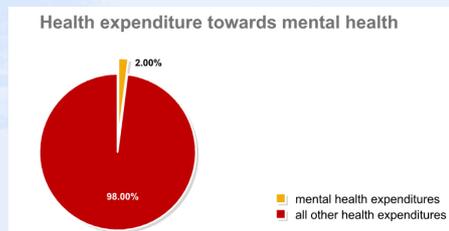




## Mental health system in Mongolia

- The mental health service in Mongolia is still largely based in a stand-alone mental hospital.
  - National Centre of Mental health ( 450 beds)
  - Voluntary facility for alcoholic patients (50 beds)
  - Unvoluntary facility for alcoholic patients (200 beds)
  - 21 smaller psychiatric inpatient units with 5-20 beds each in the provincial general hospitals.
- 17.7 psychiatric beds, 0.5 psychiatrists (135), 4.7 medical doctors, 7.6 nurses, 0.2 psychologists, 0.8 occupational therapist s per 100 000 population.
- The Mongolian mental health system operates at the primary, secondary and tertiary care levels.

## Financing of Mental Health



(WHO-AIMS Mongolia, 2006)

## WHO-AIMS Report in Mongolia (2006)

- Despite mental health program and mental health legislation envisaging community mental health care, the mental health care existing is still hospital based.
- Psychosocial rehabilitation of chronic mental disorder needs to be supported by establishing day care centers and community residential homes.

## Second National mental health program /2010-2019/

### Objectives

1. To create a favorable environment for promoting mental health
2. To improve knowledge and skills of individuals to promote their mental health
3. To enhance community participation in mental health promotion
4. To improve accessibility and quality of mental health services
5. To strengthen surveillance of population mental health, its determinants, and common mental and behavioral disorders

## Promoting mental health: Concepts, emerging evidence, practice

- ▶ This activity describes the concepts relating to promotion of mental health, the emerging evidence for effectiveness of interventions and the public health policy and practice implications.



World mental health day 2011-10-10

## Psychosocial rehabilitation “Ger” Project

- Community-based day centres in Mongolian tented and portable round houses called ‘gers’ were established in 2000.
- Over a 6 year period (2002 to 2008), a total of 1100 patients attended the Ger project.
- In 2004-2005, 349 patients (38% male, 62% female) participated; of these, 136 had specific living skills training and 209 had specific vocational skills training, and 12 patients obtained independent employment.
- In this period, it was shown that the relapse of mental disorders among participants was reduced by 95%.



## Mental health care in emergency situations mental health partnership project

- › In 2009, 2010 Mongolia is affected by a “Dzud” which is type of disaster unique to Mongolia.  
(extreme cold weather conditions)
- › According to WHO guideline we conducted Psychosocial support in affected population. (provided 12 aimags and 24 soum)
- › Further psychosocial support and mental health care service teams to be included in disaster management
- › Mental health care delivery partnerships and training at local level (government, NGO, international organizations, primary health service representatives)



### Mental health care in emergency situations mental health partnership project

In the current "Dzud" situation, population in affected areas are facing physical as well as emotional and mental disorders. Medical examinations – mental health assessment: psychosocial support for 193 herdsman families, individual counseling for 357 people, group counseling for 462 people, group meetings for 1190 people.



### Mental health promotion project at primary level

- Training of primary health care personnel in early detection of mental health problems, diagnosis, and treatment within community. It included general practitioners, nurses and social workers from 24 subdistricts of capital city and conducted in 2010.
- Integration of mental health care in primary health service as whole health care promotion package to the community
- Gradual decrease of hospital loads and decentralization in tertiary level



## Mental health promotion project at primary level

### Training results compare with 2009

- \* Number of patients with mental problems admitted to primary health care increased for 3.7 times
- \* Referral of mental patients from BZD health center for tertiary level decreased for 10%
- \* Number of patients with mental problems controlled in primary health care increased for 1.7 times
- \* In primary health care increased number of mental health education training, topic day activity, disseminated materials and number of participants



## Overcome these challenges

- \* The Mental Health system in Mongolia has a range of mental health facilities. However, the existing mental health system is still largely hospital based.
- \* A move towards community care will require a change in direction of mental health funding towards community mental health facilities and promotion of mental health in the community .
- \* Options in the psychosocial rehabilitation of those with mental illness could include day care centres and community residential homes.

## Overcome these challenges

- To deliver such programs extensively, the development of training programs would be needed for various professionals, including medical students, nurses, psychologists, social workers and psychiatrists.
- Furthermore, the intersectoral collaboration among social welfare, housing, legal, employment and education sectors should be improved.
- Assisting mental health planners and evaluators and planning, providing and evaluating mental health services
- Increasing the allocation of resources for mental health

