Tackling mental ill health: The time is now

Summary
BasicNeeds empowers people with mental health problems living in poverty through community-oriented treatment and self-help support. Interventions are designed to address medical, social and economic needs, taking into account the local context.

Key messages and recommendations

**Problem:** Millions of people living with mental illness around the world are deprived of access to treatment and opportunities to lead a better life, as mental health is under resourced and under-funded.

**Recommendation 1:** Integrate mental health into every development agenda.

**Recommendation 2:** Invest in holistic community based mental health care interventions.

Context
The World Health Organisation\(^1\) (WHO) estimates that nearly 13% of all disease in the world is attributed to mental health, affecting up to 450 million people worldwide at any one time. Depression\(^2\) alone is one of the leading causes of disability worldwide. The cost to the world economy is some US$2.5 trillion per year in reduced economic productivity and physical ill-health, yet resources are scarce, with mental health being allocated less than 2%\(^3\) of health spending in most low and middle income countries.

About the innovation
BasicNeeds is an international Non-Governmental Organisation (iNGO) working to improve the lives of people living with mental illness and epilepsy.

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\(^1\) [http://www.who.int/mental_health/publications/action_plan/en/](http://www.who.int/mental_health/publications/action_plan/en/)


By working in partnership with local people and partners, BasicNeeds has built an innovative and effective Model\(^4\) for recovery and sustained good mental health that uses meaningful work and community support, as well as treatment, to help those living with mental illness in resource-poor settings.

Predominantly focused on low and middle income countries in Africa and Asia, we work right across the system: with individuals and communities, local and national governments, and international organisations. To date, over 650,000 have benefitted through our programmes in 12 countries.

“The BasicNeeds Model demonstrates how mental health care can be delivered alongside economic empowerment which ensures that both the health and socio-economic needs of people with mental health problems are address concurrently. This is an outstanding example of integration of mental health care in practice and deserves to be widely adopted in communities around the world.” — Vikram Patel, London School of Hygiene and Tropical Medicine.

Impact and recommendations
As of December 2015, BasicNeeds has reached 653,300 people through the delivery of the BasicNeeds Model, of which 127,349 are people living with mental illness and epilepsy, 101,879 are carers and 424,072 are family members.

Impact was achieved at different levels. Some key headlines:

**Affected individuals**
Overall there was improvement against baseline in the number of affected individuals who:

- Gained access to treatment (80% of participants from 58% at baseline)
- Reported reduction to their symptoms (0% to 78%)
- Participated in community groups (4% to 39%)
- Were able to work (52% to 80%)

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\(^4\) http://www.basicneeds.org/our-approach/
“I decided to join the self-help group in my area so as to join forces with people, lend a hand in farm production and raise awareness about mental health in my community. The group has changed the perception of people in the community regarding mental disorders and have shown the community that they are capable of improving lives.” – BasicNeeds participant in Ghana.

**Practice**

The impact of the BasicNeeds Model in current operational countries has penetrated into the delivery of government mental health services through integration into primary health care. Key areas of BasicNeeds’ impact:

- **Increased delivery of services**
  In 2015, 293 outreach clinics and camps were conducted by BasicNeeds’ partners. 72 treatment services including psychiatric consultations, diagnosis and medication prescriptions were facilitated and 124 treatment services provided in government-run primary health facilities.

- **Increased availability of medicines**
  Under BasicNeeds programmes, medicines are either free or subsidised, bringing down the cost of treatment per month for affected persons from an average of US$71 (£51) before joining the programme to US$32 (£23). The cost of treatment primarily comprises expenses on travel and food to reach the treatment point.

- **Leveraging of other resources**
  BasicNeeds partners leveraged support from their governments in the form of human resources for mental health camps, premises for running outreach clinics, training or self-help group meetings.

- **Increased community involvement**
  479 self-help groups were set up in 2015 which had a membership of 25,806 affected people and carers.

The community based evidence generated by programmes and partners has enabled BasicNeeds to challenge existing systems, advocate for improvements and lead change nationally and globally.
**Recommendation 1:** Integrate mental health into every development agenda

Mental health underlies physical health and there is no health without mental health. According to a recent study⁵, mental health is a cross-cutting issue for around nine of the Sustainable Development Goals (SDGs). We therefore urge policy makers to prioritize mental health and integrate it into every development agenda, as it is crucial for progress on the SDGs.

To work in isolation is meaningless and so to truly involve other practitioners in our work, including local governments, we need to demonstrate care, prevention and integration in primary care settings. BasicNeeds’ new maternal mental health programme⁶ in Ghana does this really effectively. This project contributes to reducing extreme poverty and improving maternal health and livelihoods outcomes among poor and vulnerable women with mental illness or epilepsy. For further details and advice, contact BasicNeeds.

**Recommendation 2:** Invest in holistic community based mental health care interventions

Mental illness can both be a cause and consequence of poverty and ill-health, often interfering in substantial ways with the ability of affected people to function in families and communities.

Though the problem is huge and resources are scarce, proven, scalable and innovative solutions exist. We therefore urge global funders to invest in supporting BasicNeeds to offer its Model for Mental Health and Development for implementation by local NGOs as a franchise, thus making it more widely available to far greater numbers of affected people.

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⁷ [http://www.basicneeds.org/contact-us/](http://www.basicneeds.org/contact-us/)