The Health Challenge:

Untreated or ineffectively treated mental disorders contribute a significant economic, social, civic and personal cost to society. Both directly and through their impact on increasing all cause early mortality including death by suicide. Enhanced access to effective mental health care has a substantial impact on decreasing the costs and other burdens associated with mental disorders.

Most mental disorders onset early in the life span and over 70% of mental disorders can be diagnosed prior to age 25 years. At time of onset most are mild to moderate in intensity and respond positively to currently available evidence based interventions. Most people who require these interventions however do not receive them until late in the course of illness – often after the illness has become severe and less likely to respond to treatments. Thus, early identification and rapid access to effective mental health care is a necessary health and social goal.

Depression which primarily onsets in the first three decades of life will contribute the single largest Burden of Disease globally within the next decade and has profound negative impact on social, civic, academic and economic outcomes. This BOI is more robustly felt in LMIC’s because of the population bulge in the youth demographic. As this bulge ages, the negative impacts of Depression will increase across the life span. Effective, easily applied and sustainable interventions are needed now in LMIC’s, to show positive impact currently and into the future. Four key barriers to this exist:

- lack of awareness of Depression as a mental disorder
- lack of mental health literacy including stigma and poor self-care
- lack of a clear pathway to effective community based mental health care for youth with Depression
- lack of capacity in community based health workforce trained to properly diagnose and effectively treat youth with Depression

The Solution:

We have created a simple, sustainable, inexpensive and effective global mental health innovation that addresses the burden of Depression in youth with positive impacts now and in the future as the youth demographic ages. This innovation links together:

- Youth friendly interactive media (radio programs combined with mobile phone platforms) to address the issue of awareness.
- Mental health literacy interventions for teachers and students to address the issues of mental health awareness and pathway to care (linking schools with community health clinics).
- Training for community health care providers in the diagnosis and best evidence based treatment of youth Depression (psychological and medications) to address the issues of pathway to care and capacity in community health care.

These three initiatives are seamlessly integrated to help create horizontally integrated pathway to mental health care linking communities, schools and clinics. To our knowledge, such an approach has never been applied in such a manner anywhere in the world before.
Depression will soon be the No.1 burden of illness in the world for Young People

How it Works:
The innovation incorporates interactive weekly radio programs for young people that are comprised of serialized soap operas, debates, question and answer call-ins, and quizzes and polls that they can participate in free of charge through their mobile phones. Teachers are educated in an evidence based mental health curriculum resource and teach it to their students along with school-based radio listening clubs, where students listen to and discuss the radio program together. Teachers are also trained to identify students at risk and students learn how to identify mental disorders and self-care skills. Concurrently, schools develop linkages with local community health care providers so that students (either teacher identified or self-identified) can be directly referred to health care providers. At the same time, community health care workers (who have never before been trained to identify, diagnose or treat youth Depression) undergo training in those domains. Then the schools are linked to local community health clinics – providing a seamless horizontally integrated pathway to care for youth with Depression.

The linked domains of the solution:

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>Awareness</th>
<th>Mental Health Literacy</th>
<th>Pathway to Care</th>
<th>Enhanced Competency in diagnosis and treatment of youth with Depression</th>
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</thead>
<tbody>
<tr>
<td>ACTIVITY</td>
<td>Radio Programs combine with mobile to facilitate interactivity and feedback</td>
<td>Training of teachers in a validated mental health curriculum resource – then taught in schools</td>
<td>Training teachers to identify youth at risk, youth learn to self-identify and schools are linked to local community health care providers</td>
<td>Training community health care providers to properly diagnose and effectively treat youth with Depression</td>
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<tr>
<td>EVIDENCE</td>
<td>&gt;23,600 youth engaged with the mental health radio program</td>
<td>&gt;3,400 youth exposed to the mental health curriculum in schools</td>
<td>&gt;600 teachers and health care providers trained</td>
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This is the first time such an innovative integrative approach to addressing youth depression has been undertaken. For the first time we have demonstrated: improved awareness; improved knowledge; decreased stigma; increased help-seeking; improved access to mental health care in the community; improved mental health care provision in the community and improved mental health and mental health care outcomes for young people.

Furthermore, this approach is not dependent on continued external resources and interventions. Once the capacity is embedded into both schools and community health centers it can be sustained, and the pathways into care that have been developed between schools and community health centers now become well-worn paths where previously nothing existed. Once radio programs become a “draw” for young people, the awareness continues to build. For the first time in the history of sub-saharan africa, youth who have depression can simultaneously and effectively become aware of the problem, be identified, de-stigmatized, supported at school and be effectively treated.

What is needed:
What is needed is surprisingly simple. First, government policy supported by a few key strategic directions and a small amount of funding can create this success. These components are:

- ongoing development and delivery of youth-focused radio programs that are supported by government and/or private sector sponsorship
- training of teachers in the mental health literacy resource (those currently practicing and those in teacher training)
- embedding the clinical teaching interventions into both nursing and medical training programs
- working with radio program developers to provide mental health content expertise to radio broadcasters and producers

The training program capacity can be embedded on existing health and educational training institutions using an inexpensive train the Master Trainer model. The same Master Trainers can work with radio program developers to provide mental health content expertise to the radio broadcasters and producers.

Strategy for Expanding Use of Innovation
Working with the Ministries of Health and Education, the team from TeenMentalHealth.org and Farm Radio International can provide the technical support to allow for the development and embedding of these activities in a cost-effective and sustainable manner.

Next Steps
Jurisdictions that are interested in scaling out this evidence based intervention can contact Professor Dr. Stan Kutcher
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