Lagos State Mental Health Policy



Lagos State Ministry of Health Mental Health Desk 1/1/2011

INTRODUCTION

There exists an urgent need to adopt a Mental Health Policy for Lagos State. A National Policy was introduced in 1991 in Nigeria. The policy was developed based on identified problems in mental health in Nigeria. Its general contents were:

- 1. Equality and social justice
- 2. Patients to have same rights as physically ill persons, including entitlement to treatment close to domicile
- 3. Services to be integrated with general health services
 - a. Comprehensive coverage through integration into primary health care
 - b. Training of PHC personnel in medical /psychological skills
 - c. Inter-sectoral collaboration with social development agencies (DFFRI)
 - d. Health attitudes/habits to be fostered among youths
 - e. Anti-stigma efforts among population
 - f. Special facilities to be provided for vulnerable /disadvantaged groups
- 4. NGOs to be encouraged
- 5. Cooperation with international organizations
- 6. Periodic review of legislation
- 7. Research to be encouraged and funded

However, this policy has not been implemented nationwide and remains a broad statements of good intentions. No timelines have been put in place, and no specific structures for implementation have been created. Another challenge was there were no dedicated human or financial resources committed to the Mental Health project.

In order not to be stalled by the same road blocks, the Lagos State Mental Health Policy will have sufficient strategies, properly detailed and funded, to deliver the key objectives of the Mental Health Policy.

MENTAL HEALTH POLICY FOR LAGOS STATE

This policy is based on the national philosophy of social justice and equity.

POLICY 1

Mental Health Promotion

- Increase awareness and sensitization of individuals, communities, vulnerable and special groups.
- Combat STIGMA and DISCRIMINATION against individuals and groups with mental health problems and promote their social inclusion.



- Advocate and teach early detection and management of mental sub-normality, autism and other childhood and adolescent mental health issues.
- Preventive measures are to be taken to reduce alcohol and drug abuse.

POLICY 2

Primary Care and Access to Services

- Comprehensive coverage of mental health issues to be pursued through integration of mental health care services into primary healthcare.
- Training in mental health and psychological skills to be given to all health care personnel.
- Any service user who contacts their primary health care team with a common mental health issue should:
 - Have their mental health needs identified and assessed
 - Be offered effective treatments, including referral to specialist services for further assessment, treatment and care if they require.
- Treatment including drugs for mental ailments are to be made available free of charge at all levels of care.

POLICY 3

Treatment Guidelines at Primary Healthcare Level

- Minor mental ailments have been shown to constitute majority of mental illnesses.
- Minor ailments as stipulated in the Lagos State Government Mental Health Treatment Protocol booklet will be treated at the primary healthcare (PHC) level.
- Drugs needed to treat such ailments are to be made available and accessible at the PHC level.
- The private Health Sector is to be involved in a process of capacity building and collaboration in order to increase their involvement in the treatment of mental disorders.

POLICY 4

Services for People with Severe Mental Illness

Each patient who is assessed as requiring a period of care away from their home should have:

• Timely access to hospital care in an environment that protects the patient and the general public.



- There should be a clear and detailed aftercare plan on discharge which highlights the care and rehabilitation to be provided for the patient and specifies actions to be taken in a crisis.
- Primary healthcare whilst acting, as an entry point must be backed up by good, quality, and acute inpatient services in strategic general hospitals, which must be regionally spread.
- Dedicated social workers must be available to assist in treatment and rehabilitation of patients.
- A network of Community Mental Health Services, organized by psychiatrists and including clinical psychologists and social welfare officers, will be based in the community and focused on keeping the mentally ill in treatment and living and working actively within the community. There will be active participation from private sector Stakeholders, such as NGOs, Religious Groups, User Groups, philanthropic organizations, and the Organized Private Sector in the creation of a strong network of aftercare operations and facilities such as Half-way houses and assisted employments programs.

POLICY 5

Reduction of Work-Place Stress and the risk of Suicide

Local health and social care communities should prevent suicides by:

- Promoting mental health for all, working with individuals, communities, and employers.
- Delivering high quality mental health care
- Ensuring that anyone who has attempted suicide has a mental health evaluation
- Ensuring that medical staff are competent to assess the risk of suicide among individuals of high risk
- Develop local systems for suicide audit to learn lessons and take necessary actions

POLICY 6

Human Resources for Mental Health

- A concerted effort is to be made to train and retrain existing personnel and employ as required.
- A multidisciplinary and multi-sectoral approach to mental health care is to be adopted.



- The stakeholders will include the Ministry of health, Ministry of Youth, Sports and Social Development, Ministry of Education, and Ministry of Women's Affairs and Poverty Alleviation, Private Healthcare providers, and voluntary organizations.
- NGOs should be encouraged to assist in the promotion of mental health.
- Cooperation with international organizations.
- Periodic review of legislation. Lagos will push for the updating and modernization of Mental Health Legislation in Nigeria (the extant law was revised in 1955. The draft of a new law, drawn up in 2003, is yet to be passed by the National Assembly.
- Research into Mental Health issues, including traditional remedies, is to be encouraged and funded.

