Promoting Access to Mental Health Care Services using community structures such as Traditional Mental Health Centers in Ghana

\*Gina Teddy, \*\*Wendy Abbey, \*\* George Owoo: \*Ghana Institute of Management and Public Administration, \*\* Human Rights Advocacy Centre

Access to mental health care and services in Ghana is problematic requiring collaborative action among multiple actors to improve quality of care, reduce inequity, inaccessibility and social exclusion for those in desperate need of the service. It is estimated that 2.8 million people live with mental disability in Ghana, yet less than 2% access mental health services. The systematic challenges in providing mental health services cuts across the country leading to treatment gap of about 98%. There is limited trained human resources, poor budgetary allocation leading to acute financial constraints, acute logistical and drug shortage, huge disparities in the allocation of facilities, congestions at the facilities, high stigma and lack of information for mental health.

The challenge of strengthening mental health services in Ghana require multi-sectoral approach and collective leadership to harness resources to enable innovatively bridge the accessibility gap in service provision. Yet, key stakeholders are not effectively collaborating to harness their limited resources towards service provision or using community systems to mobilize support for mental health service. This study analyze the impact of failed collective leadership in providing mental health services in Ghana.

Using an exploratory approach, a broader study was conducted across six regions in Ghana using both qualitative and quantitative methods to generate primary and secondary information from key stakeholders on promoting access to quality mental health services in Ghana using Traditional Mental Health Centres (TMHCs) and other community systems.

The study’s preliminary findings shows that despite the systematic challenges associated with mental health care and services, there is no culture of collective leadership to enable maximize the limited resources, complement each actors efforts or mobilise key actors for collaborative action between the formal and informal sector to improve mental health. The Mental Health Act and other policy frameworks are not also addressing this fundamental challenge of managing multiple actors. Key actors are working still working in silos, duplicating some of their efforts, despite the range of capacities, expertise and motivation available to address the problems related to mental health care and service provision. We are advocating for the Mental Health Authority to provide stewardship towards collective leadership culture to enable pull the efforts of actors such as the Ghana Health Service, Christian Health Association Ghana, NGOs, Donors, Community Systems like the TMHCs and leaders for strategic implementation to improve mental health in Ghana.