

Other significant mental health complaints

mhGAP Training of Health-care Providers
Training manual
Supporting material



World Health
Organization

OTH supporting material

- Role plays
- LIVES intervention
- Case scenarios
- Alternative relaxation exercises
- Multiple choice questions
- Video link

Activity 4: mhGAP OTH module – assessment, management and follow-up

<https://www.youtube.com/watch?v=t6EP24FTzn8&index=17&list=PLU4ieskOli8GicaEnDweSQ6-yaGxhes5v>

OTH role plays

Note: Role plays 3 and 4 are additional for supplementary activities.

Role play 1: Assessment

Purpose: To practise performing assessment and management in exposure to extreme stressor (violence).

Duration: 30 minutes.

Situation: PERSON SEEKING HELP

- You are a 35-year-old woman with three children ages 10, 7 and 5.
- You have been married to your husband for 12 years and the first four of those years were happy.
- However, your husband lost his job and his parents died all within quick succession eight years ago and that is when he started using alcohol and drugs to cope.
- He would beat you when he was really drunk. The beatings are always on your body and never on your face that way no one else can see the bruises. He has broken your ribs several times. He has almost broken your back on one occasion. He also beats your children and ritually humiliates them. When he beats your children, you throw yourself in front of him to have him beat you and save your children.
- You work but he takes all the money and spends it on alcohol and drugs. There is never enough money for food.
- You and your children are malnourished
- Your children are sick and withdrawn. They do not play any more and are afraid of their father. They do not want to stay in the house and repeatedly ask you to leave. You are very worried for your children especially as your husband humiliates them regularly.
- Your husband's father was an important person in your community before he died and as a result you cannot go to any one for help as you fear that will bring shame on your father-in-law's memory and your husband.
- You want to leave but you are too scared and do not think it is possible.

Instructions:

Let the health-care provider ask you about your experiences of violence. This is the first time you have ever talked to anyone about it and you are very scared of what will happen to you.

Role play 1: Assessment

Purpose: To practise performing assessment and management in exposure to extreme stressor (violence).

Duration: 30 minutes.

Situation: HEALTH-CARE PROVIDER

- A woman arrived at your clinic with her children this morning.
- She was brought in by her husband who was complaining that she was “crazy”.
- The children looked malnourished and unwell.
- The wife looked sick and tired.
- You smelt alcohol on the husband’s breath
- You decided that you wanted to talk to the woman alone so you politely asked the man to wait in the waiting room. You asked a colleague to look after the children and spend time playing with them giving them water and something to eat.
- You were finally able to speak to the woman alone.
- You suspect intimate partner violence, specifically the husband against the wife.
- You are very concerned about the health of the children.

Instructions:

- You start the conversation.
- Use open questions to raise the issue of violence and probe gently. Find out how it is impacting on the woman and the children. Using the LIVES intervention (see OTH supporting material), listen, enquire about needs and validate what she tells you.
- Depending on her specific needs, create a safety plan with the woman.
- Identify what further support she needs and refer her/provide her information where to go (do not give flyers/documents for her to take with her if it is not safe to do so).

Role play 1: Assessment

Purpose: To practise performing assessment and management in exposure to extreme stressor (violence).

Duration: 30 minutes.

Situation: OBSERVER

- A woman arrived at the health-care clinic with her children this morning.
- She was brought in by her husband who was complaining that she was “crazy”
- The children looked malnourished and unwell.
- The wife looked sick and tired.
- The health-care provider smelt alcohol on the husband’s breath.
- They decided that they wanted to talk to the woman alone so they politely asked the man to wait in the waiting room. They asked a colleague to look after the children and spend time playing with them giving them water and something to eat.
- They were finally able to speak to the woman alone.
- They suspect the woman has been exposed to violence specifically by the husband.
- They are very concerned about the health of the children.

Instructions:

Please keep to time:

- 3 minutes reading
- 20–25 minutes’ interview
- 5–10 minutes for feedback and small group discussion.

Please assess the following competencies:

4. Uses effective communication skills
5. Performs assessment
8. Provides psychosocial intervention

Please watch for how the health-care provider uses the LIVES approach and specifically the safety planning during the interview.

Role play 2: Assessment and management

Purpose: Participants will gain understanding of assessment and management of a person with a medically unexplained somatic complaint.

Duration: 40 minutes.

Situation: PERSON SEEKING HELP

- You are Ms Wafica. You do not have any medical history or any other priority condition.
- You not been feeling sad and you are not depressed. You have never had ideas of self-harm or suicide.
- You work as a secretary. The aches and pains make it difficult to concentrate, but you go to work every day.
- You have been coming a lot to the centre recently with different symptoms.
- It all started two months ago when your only daughter got married and moved out, but you do not see the two as connected.
- Now, you live alone.
- You have felt very lonely at times.
- Today you have come in for backache.
- You insist that there is something physically wrong with you, and you request a lot of medical tests from the health-care provider.
- You insist that you need medication.

Instructions:

- Let the health-care provider start the conversation.
- You are insistent on tests and medication until you feel that the health-care provider has convinced you otherwise.

Role play 2: Assessment and management

Purpose: Participants will gain understanding of assessment and management of a person with a medically unexplained somatic complaint.

Duration: 40 minutes.

Situation: HEALTH-CARE PROVIDER

- Ms Wafica is a 55-year-old woman who presents asking for medication for her backache.
- The results of your physical examination were entirely normal.
- You know she has been coming in a lot lately with physical symptoms that do not seem to have a cause.
- You suspect there might be an other significant mental health complaint.

Instructions:

- Perform an assessment, starting on page 148 of mhGAP-IG Version 2.0.
- You should begin the conversation by asking Ms Wafica more about her pain.
- Once complete, you should explain to Ms Wafica what you think is happening and provide psychosocial intervention.

Role play 2: Assessment and management

Purpose: Participants will gain understanding of assessment and management of a person with a medically unexplained somatic complaint.

Duration: 40 minutes.

Situation: OBSERVER

- Ms Wafica is a 55-year-old woman who presents asking for medication for her backache.
- The results of the physical examination were entirely normal.
- She has been coming in a lot lately with physical symptoms that do not seem to have a cause, and the health-care provider suspects there might be an other significant mental health complaint.
- She is now she is living alone as her daughter recently moved out, and she has felt very lonely at times.

Instructions:

Please keep to time:

- 3 minutes reading
- 20–25 minutes' interview
- 5–10 minutes for feedback and small group discussion.

Please assess the following competencies:

4. Uses effective communication skills
5. Performs assessment
8. Provides psychosocial intervention

And grade the level of competency the health-care provider achieves.

Role play 3: Assessment and management

Purpose: To practise performing assessment and management in stress.

Duration: 40 minutes.

Situation: PERSON SEEKING HELP

- You are Vladimir, a 51-year-old man.
- You are married with four children.
- Four months ago at work, 15 people lost their jobs. Since then, there are fewer people so there is much more work to do. Additionally, you and everyone else are now worried that more people will lose their jobs, and that you might be next.
- You think about this a lot.
- You worry that you will not be able to provide for your family.
- You spend so much time worrying that you cannot sleep at night.
- Lately you feel unwell all the time, particularly very tired.
- You are often irritable with your wife and children, which upsets you greatly.
- You have been a smoker for a long time, and lately you are smoking much more than you used to.
- You are not sad or suicidal – you would never dream of killing yourself.
- Your wife has told you to stop yelling at the children and told you to see a health-care provider otherwise she might leave you.
- You would like to sleep better and ask for some medication for this.

Instructions:

Let the health-care provider start the conversation.

Role play 3: Assessment and management

Purpose: To practise performing assessment and management in stress.

Duration: 40 minutes.

Situation: HEALTH-CARE PROVIDER

- You are about to see Vladimir, a 51-year-old man who is not feeling well.
- You have seen him in the past for chest infections as he is quite a heavy smoker.
- Today, he is come in to see you as he is feeling “unwell”.

Instructions:

- Perform an assessment for other significant mental health complaints, starting on page 143.
- Once complete, tell Vladimir what you think is happening and provide psychosocial intervention. This should include relaxation training.

Role play 3: Assessment and management

Purpose: To practise performing assessment and management in stress.

Duration: 40 minutes.

Situation: OBSERVER

- Vladimir is a 51-year-old man who is not feeling well.
- A number of people have recently lost their jobs at his work. This has created extra stress but he is also worried he will lose his job.
- He is irritable with his family, tired and not sleeping properly.
- He is not sad or suicidal.
- His wife has told him to stop yelling at the children and told him to see a health-care provider otherwise she might leave him.
- He would like to sleep better and ask for some medication for this.
- The health-care provider will perform an assessment and then a psychosocial intervention for an other significant mental health complaint, including relaxation training.

Instructions:

Please keep to time:

- 3 minutes reading
- 20–25 minutes' interview
- 5–10 minutes for feedback and small group discussion.

Please assess the following competencies:

4. Uses effective communication skills
5. Performs assessment
8. Provides psychosocial intervention

And grade the level of competency the health-care provider achieves.

Role play 4: Assessment and management

Purpose: To practise assessment and management of a person experiencing post-traumatic stress disorder.

Duration: 40 minutes.

Situation: PERSON SEEKING HELP

- You are Magui, a 29-year-old mother of three children who has been displaced from your home by civil war.
- The war has been brutal. Many women and children have not been allowed to escape, but were captured and harmed.
- There have been attacks on hospitals, convoys of women and children, and international workers.
- You were lucky to escape with your children but you do not know where your husband is, as you were separated as you fled.
- You travelled for two weeks by foot with your children to find somewhere safe. That was four months ago.
- Now that you are in safe accommodation you are finding things incredibly difficult.
- You often wake at night, screaming. You wake up your children and the other residents. You have nightmares about the attacks.
- Sometimes during the day you have very vivid memories of when a bomb went off in a marketplace. You were not injured, but people near you were. When you have these memories you feel as though you are transported back, you can hear the screams and smell the blood.
- You feel constantly on edge, any loud noise will make you jump.
- You avoid the marketplace now, which makes it difficult to get food for your children.
- You have come to see the health-care provider to get help.

Instructions:

- Let the health-care provider start the conversation.
- You are on edge and startle easily to any noise during the interview.

Role play 4: Assessment and management

Purpose: To practise assessment and management of a person experiencing post-traumatic stress disorder.

Duration: 40 minutes.

Situation: HEALTH-CARE PROVIDER

- You are a health-care provider working in a clinic which services a large refugee population, as a nearby province has been affected by brutal civil war.
- You are about to see Magui, a mother of three children.
- You know that Magui is a refugee herself and suspect that she may have post-traumatic stress disorder.

Instructions:

- Perform an assessment for an other significant mental health complaint, starting on page 143 of your mhGAP-IG.
- After the assessment, explain to Magui what you think is happening.
- Then, proceed to perform management as required.

Role play 4: Assessment and management

Purpose: To practise assessment and management of a person experiencing post-traumatic stress disorder.

Duration: 40 minutes.

Situation: OBSERVER

- The health-care provider works in a clinic which services a large refugee population, as a nearby province has been affected by brutal civil war.
- They are about to see Magui, a mother of three children.
- Magui is a refugee herself and the health-care provider suspects that she may have post-traumatic stress disorder.
- The health-care provider will perform the assessment starting on page 143 of themhGAP-IG, then will proceed to appropriate management.

Instructions:

Please keep to time:

- 3 minutes reading
- 20–25 minutes' interview
- 5–10 minutes for feedback and small group discussion.

Please assess the following competencies:

4. Uses effective communication skills
5. Performs assessment
8. Provides psychosocial intervention

And grade the level of competency the health-care provider achieves.

LIVES intervention

First-line support involves 5 simple tasks. It responds to both emotional and practical needs at the same time. The letters in the word “LIVES” can remind you of the 5 tasks that protect women’s lives.

L isten	Listen to the woman closely, with empathy, and without judgement.
I nquire about needs and concerns	Assess and respond to her various needs and concerns – emotional, physical, social and practical (e.g. childcare).
V alidate	Show her that you understand and believe her. Assure her that she is not to blame.
E nhance safety	Discuss a plan to protect herself from further harm if violence occurs again.
S upport	Support her by helping her connect to information, services and social support.

First-line support care for emotional needs

First-line support may be the most important care that you can provide, and it may be all that she needs.

First-line support is care for emotional and practical needs. Its goals include:

- Identifying her needs and concerns
- listening and validating her concerns and experiences
- helping her to feel connected to others, calm and hopeful
- empowering her to feel able to help herself and to ask for help
- exploring what her options are
- respecting her wishes
- helping her to find social, physical and emotional support
- enhancing safety.

Remember: When you help her deal with her practical needs, it helps with her emotional needs.

When you help with her emotional needs, you strengthen her ability to deal with practical needs.

You do not need to:

- solve her problems
- convince her to leave a violent relationship
- convince her to go to any other services, such as police or the courts
- ask detailed questions that force her to relive painful events
- ask her to analyse what happened or why
- pressure her to tell you her feelings and reactions to an event

These actions could do more harm than good.

Tips for managing the conversation

- Choose a private place to talk, where no one can overhear (but not a place that indicates to others why you are there).
- Assure her that you will not repeat what she says to anyone else and you will not mention that she was there to anyone who doesn't need to know. If you are required to report her situation, explain what you must report and to whom.
- First, encourage her to talk and show that you are listening.
- Encourage her to continue talking if she wishes, but do not force her to talk. ("Do you want to say more about that?")
- Allow silences. If she cries, give her time to recover.

Remember: Always respect her wishes.

OTH: Case scenarios: Psychosocial interventions

Symptoms of depression not amounting to depression

A 69-year-old woman presents with physical aches and pains all over her body, frequent headaches and low mood. She states that she has been crying a lot recently because of the pains. She says she feels lonely as her family and grandchildren have moved to a different city. She is staying active and spend times with friends. She is able to cook and attend to her daily chores but she has low motivation for trying anything new, she feels sad and in pain.

Stress

A 45-year-old man attends primary health-care clinic with stomach aches. He describes the pain as so bad that when it comes on he has problems catching his breath. He has had to take a lot of time off work because of his stomach aches and as a result he has fallen behind in his work. He is the main breadwinner in the family but feels very anxious as he has a demanding boss and so much work to catch up on he does not know where to start. He is struggling to sleep at night as he is always thinking about what he has to do.

Post-traumatic stress disorder

A 23-year-old woman presents to the primary health-care provider with racing heart and problems breathing. After spending some time listening to her, the health-care provider learns that she was raped one year ago at a party. She has flashback memories of that attack and nightmares that stop her from sleeping. She avoids spending time with people as she feels frightened by them. If she is in social situations she feels very jumpy and uncomfortable and always seek to leave early. She is exhausted.

Bereavement

A 22-year-old girl attended primary health-care clinic complaining of aches and pains all over her body. She explained that she is socially isolated and does not want to see people as they just make her very angry and she finds them unhelpful. She feels sad all the time. After some time, she explains that her father died four months ago. She was close to her father and misses him and is angry and does not understand how people can carry on as normal.

Medically unexplained somatic symptoms

A 35-year-old man presents with a pain in the middle of his body, problems breathing, dizziness and nausea when he bends forward. He says that he has been experiencing these problems for approximately four years and has seen countless doctors and specialists. He had to leave his job as a mechanic because he could no longer bend forward. He says the severity of the symptoms have stayed the same over the four years but he has become increasingly frustrated and tired of living with them of and trying to find out what is wrong with him.

Alternative relaxation exercises

Basic relaxation and mindfulness strategies: Participatory demonstration (30 minutes)

- Breathing and relaxation exercises are great tool for soothing the nervous system.
- They can help relieve the tension that builds in the body and mind from difficult life experiences, and can help alleviate feelings of stress, depression, anxiety, anger and grief.
- They can help us feel calmer, steadier and more balanced.
- We call many of these activities **mindfulness practices**, because they help us to become **more mindful of the present moment**, and less caught up in distractions and stress.

Demonstration 1: Abdominal breathing (or belly breathing) (five minutes)

- Often when we are stressed, our breathing becomes shallow, high in our chests, and we forget to breathe deeply into our bellies.
- Abdominal breathing is very calming and centring, and helps us to draw nurturing oxygen deep into our lungs.

Instructions for the group:

- Bring your hands to your lower belly with your two middle fingers touching.
- Relax your shoulders.
- Take a long, deep, gentle **inhale**, sending the breath all the way down to your belly, so your stomach expands (keep your shoulders relaxed). You should find that your middle fingers naturally part slightly as the belly expands with the breath.
- **Exhale** slowly, feeling how the belly naturally draws inwards as the breath exits the body and the middle fingers slide to touch again.
- Do this abdominal breathing a minimum of 10 times (inhale/exhale).
- **With children** you can explain that when they inhale they are blowing up their tummy softly like a balloon, and when they exhale, the air is going slowly out of the balloon again.

Demonstration 2: The wave of light (five minutes)

- This exercise combines breath, movement and visualization.

Instructions for the group:

- Find a comfortable standing position.
- Relax your shoulders. Ground your feet evenly.
- Feel the length in your spine, from your tailbone to the top of your head.
- Place your left foot forward, grounding the feet again.
- **Inhale:** float your hands forwards and over your head. Imagine you are drawing a wave of bright light above your head.
- **Exhale:** move your hands downwards, past the shoulders, as if you are showering yourself with a wave of soothing cool light.
- Keep this flowing for at least ten breaths. With each inhale imagine drawing that wave of beautiful, healing light above you. With each exhale, imagine that cool, shining light flowing down over you, taking your tightness and troubles away.
- Repeat on the other side, with the right foot forward. Breathe in the shower of light. Exhale and let go of any negativity within you. Feel the flow of light cleansing and renewing you.

Demonstration 3: Loving kindness (a short exercise for children) (five minutes)

Instructions for the group:

- Close your eyes and think of someone you really love.
- Imagine that person is standing in front of you – really picture them there.
- What do they look like? Picture their eyes, and their smile. Perhaps they have a pleasant familiar smell.
- Now put your arms around yourself and imagine that person is giving you a big hug, sending you love and strength.
- Hug them back, sending that love back to them.

Demonstration 4: Using hands to release stress and build calm (five minutes)

Instructions for the group:

- Make a fist with your hand.
- Take an inhale and imagine you are squeezing all your worries and stress into your fist,
- Hold your breath. Squeeze those hands really tight!
- Then exhale deeply, and release your fingers – letting the stress and worries go.
- Now, with one hand, take hold of a finger on the opposite hand.
- Squeeze the finger softly and inhale, saying in your head, “I am calm”.
- As you exhale, relax the squeeze and say, “I am peaceful, I am kind”.
- Variation: These words are an example. You can substitute many others, such as, “I am loved, I am perfect just as I am, I am clever, I am strong”, etc.

Demonstration 5: My special place (a guided meditation script) (10 minutes)

Instructions for the group:

- Sit or lie down in a comfortable position.
- Close your eyes.
- Relax all the muscles in your body.
- Take several deep breaths, breathing in through your nose and out through your mouth.
- Inhale all the way to your belly. Exhale, feel your chest soften.
- Keep breathing slowly and softly. Gentle long inhales then gentle long exhales.
- Listen and follow the story in your mind.

Facilitator to read this script, slowly and in a calm voice:

Think about a place that makes you feel safe, calm and happy. This could be a beach, a forest, a place in your house/a loved one’s house. It could be near the ocean, or a river or lake, or up in the mountains. It can be a real place that you know, or an imaginary place you would like to visit. Wherever it is, this is a place where you feel completely safe, calm and contented. It is a place where you can be completely yourself, where you feel free, where you feel happy and at ease.

Continue to breathe in slowly, and breathe out slowly.

Imagine you are standing in that place that makes you feel safe, calm and happy. What does it look like? What do you see? Is it sunny? Or cool? What colours do you see? Imagine yourself walking around, as you notice things. Is there any water, or trees? Is there grass? Or sand? What colour is the sky? What else do you see? Are there flowers? Perhaps you see animals or people?

Now focus on the sounds of this place. What can you hear? Can you hear the wind? Do you hear water? Maybe there is the sound of birdsong. Perhaps you can hear music, or children playing. If you are walking, what does the ground sound like as you walk on it?

Now start to think about the lovely smells in this happy place. What fragrances are entering your nostrils? Perhaps the scent of a flower, or your favourite food cooking somewhere. Breathe in deeply and enjoy those good smells.

And now, start to focus on how it feels to be here. Check into your body. How does your skin feel – can you feel the breeze on your skin? Do you feel warm or cool? What do you feel inside? Maybe some warmth, or a smile.

You may like to keep walking, or you may like find somewhere comfortable to lie down in this place now; you choose – it's your space and you can do anything you want here, you can be yourself. Just continuing to enjoy how it feels to be here, calm, relaxed, safe and happy, surrounded by these beautiful sights, sounds, smells and sensations.

Leave a silence of at least two minutes, before continuing:

This is a place you can always come back to, which is always there, inside your heart. You can visit whenever you want. Now, very gradually, begin to notice your breathing again – the gentle rhythm of inhales and exhales. Notice the feeling of the air on your skin. Very softly begin to wiggle your fingers and toes. Inhale and take a big stretch. Exhale deeply. When you are ready, open your eyes.

Variation: For young children, this kind of concentration might be difficult. In cases such as this, you can “tell a story” instead, so that you create the safe space for them as part of your story. For example: “Imagine that you are standing on a white sandy beach. It's early in the morning, and everything is quiet. The sun is rising slowly and you can feel the warm light on your face and your body. You are feeling happy and peaceful. The sand beneath your bare feet is soft and warm. A light breeze strokes your face. The sky is blue and open, and birds are flying and singing above. This place is safe and you can relax here”.

OTH multiple choice questions

1. Which of the following could be a presentation of an other significant mental health complaint? Choose the best answer:

- A Somatic symptoms, examination and blood tests reveal presence of HIV.
 - B Anxiety and agitation, following sudden cessation of alcohol.
 - C Tired and stressed, medically unexplained somatic symptoms.
 - D Irritated and stressed, history-taking reveals a manic episode.
-

2. Which of the following conditions would exclude an other significant mental health complaint? Choose the best answer:

- A Depression.
 - B Self-harm/suicide.
 - C Physical violence.
 - D Bereavement.
-

3. Which of the following cluster of symptoms fits best with an other significant mental health complaint? Choose the best answer:

- A Fixed false beliefs and lack of realization that one is having mental health problems.
 - B Elevated mood and loss of normal social inhibitions.
 - C Anxiety and agitation after stimulant use.
 - D Feeling depressed after an extreme stressor.
-

4. Which of the following cluster of symptoms fits best with an other significant mental health complaint? Choose the best answer:

- A Fatigue and confusion after a seizure.
 - B Failure to thrive and poor motor tone.
 - C Medically unexplained somatic symptoms.
 - D Delirium associated with cerebral malaria.
-

5. Which of the following is important in the management of other significant mental health complaints? Choose the best answer:

- A Prescribing anti-anxiety and/or antidepressant medication.
 - B Give a vitamin injection.
 - C Repeat multiple laboratory investigations.
 - D Reduce stress and strengthen social supports.
-

6. Which of the following might you tell someone who has medically unexplained somatic complaints, where you have identified an other significant mental health complaint? Choose the best answer:

- A The symptoms are all in their head, and they need to 'snap out of it' and stop wasting your time.
- B All laboratory investigations should be repeated in three months.
- C You understand that the symptoms are not imaginary, and ask what their explanation is.
- D If there are any incomplete investigations they should be hopeful that that will find the answer.

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7. Which of the following is part of a psychosocial intervention where the person seeking help witnessed the death of a loved one to violence? Choose the best answer:
- A They should talk about the incident as much as possible, even if they do not want to.
 - B It is normal to grieve for any major loss, in many different ways, and in most cases grief will diminish over time.
 - C Avoid discussing any mourning process, such as culturally appropriate ceremonies/rituals, as it may upset them further.
 - D Refer to a specialist within one week of the incident if they are still experiencing symptoms.
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8. Which of the following steps, in the correct order, are involved in performing relaxation training? Choose the best answer:
- A Explain what you will be doing, start relaxation exercise and demonstrate breathing, focus on breathing technique, then encourage self-practice.
 - B Encourage self-practice before explaining or demonstrating, then focus on breathing technique.
 - C Start relaxation exercise and focus on breathing, then explain what you have done at the end of the exercise.
 - D Discuss traumatic event, then focus on breathing technique, then encourage self-practice.

OTH multiple choice answers

- | | | |
|--------|--------|--------|
| 8. = A | 6. = C | 3. = D |
| 7. = B | 5. = D | 2. = A |
| | 4. = C | 1. = C |