Improving Quality of Care, Human Resources, and Access to Essential Medicines for Neurological, Mental, and Substance Use Disorders (MNS) in Sub-Sahara Africa

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Neuroscience Forum Member and Former Chair



Forum on Neuroscience and Nervous System Disorders

Established in 2006, the Forum is designed to provide its members with a neutral venue for exchanging information, sharing individual views, and allowing a structured opportunity for dialogue and discussion while scrutinizing critical and possibly contentious scientific and policy issues. Representatives from government, industry, academia, patient advocacy organizations, and other interested parties serve as Forum members.

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Mental, Neurological and Substance Use Disorders

- Approximately 4 out of 5 people with serious MNS disorders living in low- and middle-income countries do not receive needed health services.
- Sub-Saharan Africa has one of the largest treatment gaps for MNS disorders in the world.

Workshops and Collaborations

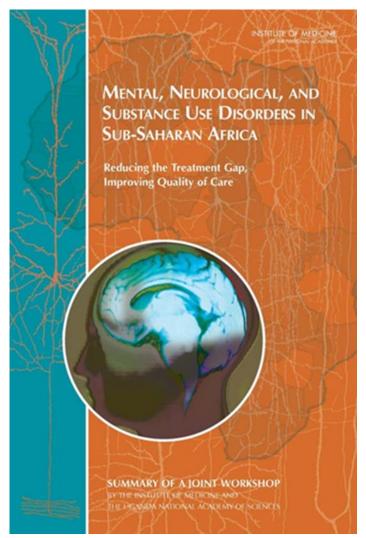
- Reducing the Treatment Gap, Improving the Quality of Care –
 Kampala, Uganda (2009)
 - African Sciences Academy Development Initiative
 - Uganda National Academy of Sciences
- Strengthening Human Resources Through the Development of Core
 Competencies for MNS Disorders in SSA Kampala, Uganda (2012)
 - African Sciences Academy Development Initiative
- Improving Access to Essential Medicines for MNS Disorders in SSA –
 Addis Ababa, Ethiopia (2014)
 - African Sciences Academy Development Initiative
- Providing Sustainable Mental Health Care in Kenya Nairobi, Kenya
 (2015)
 - African Sciences Academy Development Initiative
 - Janssen Pharmaceuticals, Inc.

MNS in Sub-Saharan Africa: Reducing the Treatment Gap, Improving Quality of Care

Joint Workshop by the IOM and Uganda National Academy of Sciences Kampala, Uganda August 2009

Workshop Objectives:

- Examine the burden of disease for MNS disorders.
- Explore opportunities to improve national, evidence-based policies addressing quality of care and health care systems for mental and neurological disorders. Discuss how to facilitate collaborations among a variety of stakeholders, including policy makers and health care professionals.



Workshop Planning Committee Members

STEVEN E. HYMAN (Co-chair), Harvard University

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CHARLES NEWTON, KEMRI-Wellcome Research Programme

DONALD SILBERBERG, University of Pennsylvania School of Medicine

Recurring Workshop Themes

- Need to consider all disorders of the nervous system, MNS disorders.
- Expand the use of high-quality, community-based care, and the training of community health workers.
 - Benefit from leveraging skills, expertise, and networks of other health fields (e.g., HIV/AIDS, malaria).
 - The role of information technology in improving awareness, training, and treatment, especially in rural settings.
- Improve the available medication formulary for MNS disorders.
- Support the need for champions who will relay these, and future, needs and concerns to resource providers.

Reducing the Treatment Gap

Critical Barrier #1: Human Resources

- Examine the human resource needs for effective delivery of treatments and improvement of the MNS health care workforce.
- Explore current health professional and non-professional education programs in SSA for MNS disorders.
- Identify training priorities at multiple stakeholder levels for incorporation.

Critical Barrier #2: <u>Essential Medicines Access</u>

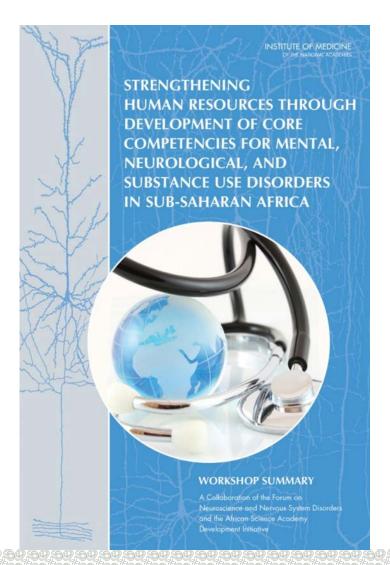
- Discuss opportunities for achieving long-term affordable access to essential medicines for MNS disorders.
- Explore challenges to improve access with a focus on four areas: demand, supply chains, selection, and financing/pricing.
- Consider current government, NGO and private group practices including decision-making strategies.

Strengthening Human Resources through Development of Candidate Core Competencies for MNS Disorders

Kampala, Uganda September, 2012

Workshop Objectives:

- Assess the future needs of MNS health care workers based on provider type, treatment environment and MNS disorder.
- Discuss potential mechanisms for task shifting and task sharing among human resources and across treatment locations.
- Explore education and training opportunities for acquiring and maintaining core competencies.
- Consider tangible next steps for the dissemination of identified human resource core competencies and performance requirements.



Workshop Planning Committee Members

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Core competencies for which providers?

Provider Category	Туре
Community/Lay Worker	Peer/service user Community health care worker/health extension worker
Non-specialized, Non-prescribing	Pharmacist Social Worker Occupational Therapist
Non-specialized, Prescribing	Clinical/health officer Nurse Medical doctor/general practitioner
Specialized	Psychiatric Nurse Psychologist Neurologist Psychiatrist

INSTITUTE OF MEDICINE

In the end....

111 core competencies for consideration by stakeholders

By Disorder

Depression

Psychosis

Epilepsy

Alcohol Use

Across Providers

Peer/service users

Non-specialized, non-prescribing

Non-specialized, prescribing

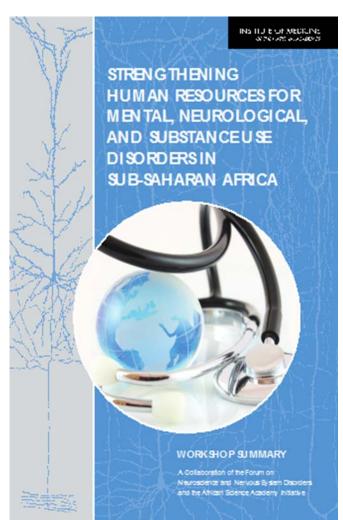
Specialized

Improving Access to Essential Medicines for MNS in SSA Workshop

Addis Ababa, Ethiopia January, 2014

Workshop Objectives:

- Identify critical barriers that impact the procurement of essential medicines for MNS disorders.
- Examine successful activities that increase access to essential medicines both within SSA and in other developing countries.
- Consider the role of governments, nongovernmental organizations, and private groups in procurement of essential medicines for MNS disorders.



Workshop Planning Committee Members

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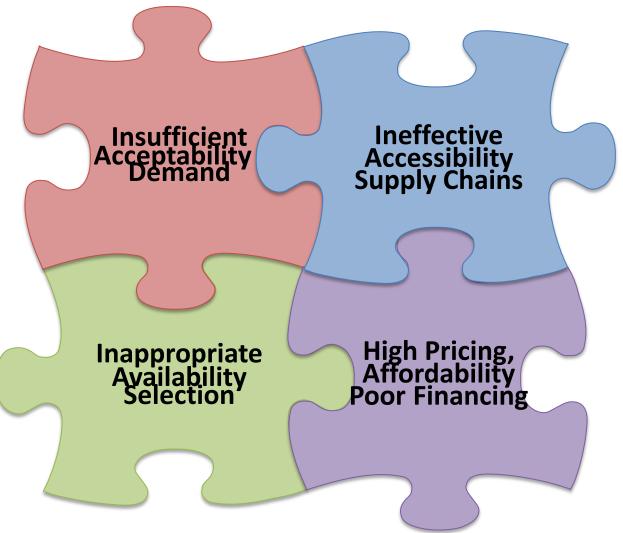
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TEDLA WOLDE-GIORGIS, Ministry of Health, Ethiopia

Improving Access: Four Challenge Areas



Adapted from: WHO and Hans Hogerzeil

Insufficient Demand

Challenges:

Low demand can be linked to the combination of low perceived need for MNS-specific medical care and inadequate training and education of health care providers and managers about MNS disorders

- Implementation of the WHO's mhGAP intervention guide and training modules
- Development of national task forces composed of key stakeholders
- Integration of patient- and family-oriented training into existing community-based programs

Inappropriate Selection

Challenges:

Lack of mechanisms to define which MNS disorders to treat, and evidence-based approaches to developing essential medicines list and treatment guidelines

- Develop a national strategy, based on mhGAP
- Use the WHO list and mhGAP guidelines to develop countryspecific evidence-based approaches
- Promotion of evidence-based selection at patient level pointof-care

Ineffective Supply Chains

Challenges:

- Lack of quality timely information flowing across supply chain system, and deficiencies in allocation and training of human resources for supply chains
- Lack of coordination within closed systems or among different tiers, and long procurement lead times with little transparency of the process

- Development of information network systems for improved communication
- Policies to increase the number of workers assigned to supply chains
- Complimentary and/or multiple procurement agencies

High Pricing/Poor Financing

Challenges:

- Lack of market analysis and data collection
- Lack of or low public and private investment in MNS disorders
- Weak pharmaceutical market; lack of price competition, poor regulation, poorly organized markets

- Evidence-based decision making on policies impacting pricing and financing
- Improved transparency of budget allocations; allocations based on disease prevalence and need
- Strengthen governance and regulations

Providing Sustainable Mental Health Care in Kenya

Nairobi, Kenya January, 2015

Workshop Objectives:

- Examine country specific opportunities to improve the health system infrastructure in Kenya in order to improve and develop sustainable access to mental health to ensure that the right patients get the right care and treatment at the right time, and in the right setting.
- Four topic areas:
 - Elements of the mental health care system (e.g., mental health information systems)
 - Engagement of key stakeholders
 - Access to medicines
 - Stigma reduction



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DAVID NDETEI, Africa Mental Health Foundation

ATUL PANDE, Tal Medical, Inc.

BEVERLY PRINGLE, National Institute of Mental Health

Potential Demonstration Projects

Diagnosis and Treatment

- Expand the mental health workforce
- Improve the use of diagnostic tools

Access to Essential Medicines

- Identify medicines in the formulary
- Improve delivery of drugs from central level to user level

Stigma

 Reduce stigma in the community and among health care providers through training and education



Mental Health Information Systems

- Collect more MNS data in current systems
- Make data collection easier and accessible

Buy-in from stakeholders and integration in current programs/efforts is key.

Thank You

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