International Seminar on SOCIO-ECONOMIC AND MENTAL HEALTH BURDENS OF HIV/AIDS IN DEVELOPING COUNTRIES

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Session 3: Care Delivery and Response from the Frontline

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PLENARY SPEECH

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The Role of NGOs in Promotioning Mental Health among PLHIVs in Malaysia

PLHIVs and mental health problems

- Diverse range of mental health issues.
- Differ according to various groups of PLHIV community
- Need clinical and psychosocial intervention
- AIDS Spending in Malaysia

	2008 (RM)	%	2009 (RM)	%
Prevention	38,855,000	44.85	45,761,000	47.76
Care & Treatment	34,741,000	40.10	35,819,000	37.39

(UNAIDS Country Progress Report – Malaysia, 2010)

- Voluntary HIV testing in Malaysia:
 - 17349 out of 17641 persons knew results of HIV test in within the year 2009
 - 98% of the people were in the rang of 15 49 years age group

(UNAIDS Country Progress Report – Malaysia, 2010)

- Mandatory HIV testing
 - Needs proper pre-test and post-test counseling

Intervention stage

• Beginning stage of status identification is crucial for intervention

study on mental health among HIV patients in Malaysia

• Psychiatric morbidity among HIV patients in Tuanku Jaafar hospital in Seremban, Malaysia (2009)

(Shane, V., James Koh, Cheah, K., S., Nikram, S., Ting, Y.L & Tong, W.T)

• Prevalence of psychiatric morbidity among 41 patients interviewed was close to 51% of which 21% suffered from depressive illness

- 31.7% of patients had suicidal thoughts
- 8% of the study samples had made a suicide attempt within one week of learning of their HIV seropositivity.
- 29.3% patients with CD4 count lesser than 200 had the ideation of suicide.

Effects on PLHIV community

- Nero-psychiatric disorders
- Serious mental illness
- Common mental disorders:
 - Depression, anxiety, substance use disorders
- Psychosocial disorders:
 - Social isolation, suicidal ideation, crime intention

Effect on the infected and the affected community

Men Women Discordant couples Children Marginalized groups

Family members Relatives Friends Colleagues

Implication on PLHIVs community

- Significant prevalence of mental health illness among PLHIVs affects:
 - Quality of life of PLHIVs and family
 - Harmony of family institution
 - Job performance and work force

Effect on the Care-givers and social workers

- NGOs work with minimum staffs
- High turn over of staffs
- Lack of professional staffs
- Increasing number of cases
- Increasing work load and office management duties

HIV/AIDS in Malaysia

- The first community response for HIV/AIDS came from NGOs.
- Aimed at:
- Reducing psychosocial impact
- Improving mental health condition
- Sustaining positive living

HIV/AIDS NGOs in Malaysia

• Under the umbrella body of Malaysian AIDS Council

- Approximately 44 partner organizations
 - Coordinate HIV/AIDS prevention, care and support programmes
 - Carry out capacity building initiatives
 - Assist in advocacy initiatives

Main Role of HIV/AIDS NGOs in Malaysia



Mediator

- NGOs have the resources and networks to link the PLHIVs to obtain services and facilities
- Mediate with other agencies to assist in financial assistance and referral services
- Play an important role in minimizing the stigma and discrimination faced by PLHIV
 - Empower the PLHIVs community
 - Educate and sensitize the general public

Counselors

- The NGO personnel takes up the role of a counselor and involve in a helping relationship
- Individual and group counseling are carried out with the PLHIVs
- Previlage of having more time to spend with the PLHIVs compared to clinical staffs

Service providers

- Occasionally accomplish task for PLHIVs
 - Making arrangements for treatment procedures
 - Dispatching medication for PLHIVs who live from the hospital

Limitations

- Lack of expertise
- Lack of skills training
- Lack manpower
- Limited outreach to hard to reach population senior citizens, physically and mentally challenged groups, children, immigrants & refugees

Needs

- Correct information on HIV/AIDS issues to cope with their condition
- Social support to lead a positive life
- Motivation to assume responsibilities to change

- Increase their self-efficacy to face the society and disperse discriminatory and stigmatization situations
- Supplement mental health programmes for PLHIVs:
 - Sustain adherence to treatment and care
 - Have a quality life
 - Build up self esteem
 - Reduce undue suffering

Local response

The National Board of Certified Counselors International (NBCC-I) has collaborated with WHO to develop a response through Mental Health Facilitation (MFH) in Malaysia

Outcome

- Universiti Sains Malaysia (USM) is the first institution of higher learning in Malaysia to complete a Mental Health Facilitation (MHF) training
- 18 USM staffs were trained as MHF trainers
- Attended a 45 hours session in the training
- NBCC Malaysia:
 - NBCC Malaysia is formed in USM under the umbrella of USAINS Holdings Sdn.Bhd. since 2010 to promote MHF trainings in Asia Pacific
- Network and Linkages
 - The USM Mentor Program and NBCC-Malaysia act as the points of reference for MHF train-the-trainers and MHF trainings
 - All MHF will be registered under Youth Council Malaysia, NBCC Malaysia and NBCC-International registry
 - The MHF training team will provide the training upon request

Future needs

• Intervention initiatives must integrate mental health facilitation in order to help the PLHIVs community.

The way forward

- Integrate MHF into HIV/AIDS education and awareness programmes
- Propose for a MHF training for care givers and social workers of HIV/AIDS organizations to acquire necessary skills for mental health intervention initiatives

Conclusion and policy implication

- There is an increasing interest to instill mental health concerns in building a healthy community in Malaysia
- We need a nationwide study in the area of mental health and HIV/AIDS in order to formulate a programme which will be cost-effective for the needs of the local community.

Recommendation

- Nationwide survey to assess the various types of mental health problem in the country
- Assess the psychosocial needs in addressing the problem
- Identify the intervention strategy that will be cost-effective in addressing the mental health problems among the PLHIVs in Malaysia
- Include and promote holistic mental health approach in HIV/AIDS programmes carried out in Malaysia by training the frontline workers in the NGOs
- Advocacy and smart partnership must be developed among the HIV/AIDS partner organizations as well as the civil society so that mental health initiatives will include both clinical care as well as community care in order to promote positive living amongst the PLHIVs community

