Since Nepal’s 25 April and 12 May earthquakes, Dr Neelam Kumari has treated more patients with mental health issues than at any other time in her career.

The softly-spoken medical officer at Dolakha’s Jiri Hospital says that the increase in patients suffering mental health problems is understandable given the trauma suffered in the district. Dolakha District was one of the 14 most affected by the quakes, with 87 percent of houses fully or partially destroyed.

“Since the earthquake I have seen many patients with conversion disorders, patients in acute stress and grief, and those with substance abuse problems and alcohol withdrawal symptoms,” she explains. “Many still have no permanent structure to call home.”

To improve the basic skills of health care workers in diagnosing, treating and referring patients with mental health issues, Nepal’s Ministry of Health and Population and WHO are carrying out mental health training workshops for health care professionals working in districts most affected by the earthquakes. The training modules are based on WHO’s Mental Health Gap Humanitarian Intervention Guide, a set of clinical guidelines issued in 2010 to help health care workers in non-specialized settings provide basic services for persons suffering mental, neurological and substance use disorders.
According to Dr Kumari, the five-day training workshop has supplemented her skills and will allow her to be more effective in meeting post-quake challenges related to mental health.

“The training has been very useful, particularly for diagnosing depression and substance abuse problems. I had some of these skills before, but this is enhancing them. Up until now we have prescribed a lot of medication, but this isn’t always the best way to deal with the issues,” she says.

WHO Nepal’s Dr Kedar Marahatta, who is responsible for implementing the workshops, says that like Dr Kumari the 129 other health workers that receive the training will be better equipped to deal with patients presenting with mental health issues.

“In the wake of disasters such as Nepal’s the need for mental health care services increases. In low-income countries this can overwhelm services and result in patients receiving inadequate care, or no care at all. These workshops will increase the capacity of health care workers in affected districts to diagnose and treat patients suffering mental health issues, and also enhance referral mechanisms between specialized services in Kathmandu and health care facilities in the districts,” he explains.

According to Dr Marahatta, this will have the added benefit of strengthening Nepal’s health system in the long-term. “Mental health care services have, historically, been overlooked in Nepal. We have the opportunity now to strengthen and expand these services, thereby increasing the health system’s capacity. In the affected districts these workshops will do just that, and they could also provide the blueprint for similar programs to be implemented country-wide in future.”

Dr Sagun Ballav Pant, a trainer at the workshops and a psychiatrist at Tribhuvan University Teaching Hospital, echoes this sentiment. “After the earthquake mental health issues have been prioritized, which is good. But this is not just about the current humanitarian crisis. These workshops will ensure that a basic level of mental health care will exist long after the crisis is over,” he says.

While this long-term vision is inspiring, for Dr Kumari the immediate needs of patients in her quake-ravaged district are uppermost in her mind. “There’s been a lot of suffering in our district. As a result of these trainings myself and my colleagues will be in a better position to screen, treat and refer patients who need mental health care,” she says. “That’s important.”