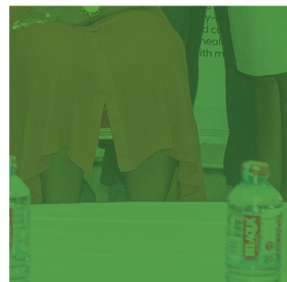
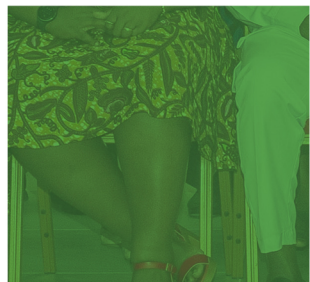
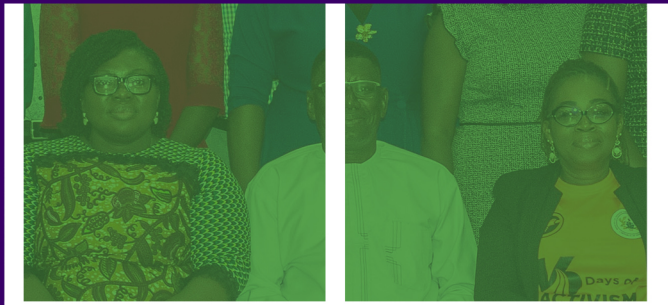


MENTAL HEALTH AUTHORITY



2023 ANNUAL REPORT



DECEMBER 2024



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MENTAL HEALTH AUTHORITY

2023 ANNUAL REPORT



Table of Contents

List of Figures	v
Acronyms	vi
Executive Summary	vii
Chapter 1: Background	1
Chapter 2: Leadership and Governance	3
2.2 Senior Managers Conference	4
Chapter 3: Financial Performance	5
3.1 Income/Inflows	-
3.2 Expenditure/Outflows	6
3.3 Assets and Liabilities	7
3.4 Psychotropic Medication	-
3.5 Staff Compensation – GOG	8
3.6 Internal Audit Activities	-
3.7 External Audit	9
3.8 Audit Follow-ups	-
3.9 Annual Stock Taking	-
3.10 Audit Training	-
Chapter 4: Human Resource for Health	10
Gender Distribution	-
4.1 Temporary Workers	11
4.2 Performance	-
4.2.1: Review of Staffing Norms of the Psychiatric Hospitals	-
4.2.2: Promotion, Conversion, And Up-Grading Policy	12
4.2.3: Staff Performance Appraisal	-
4.2.4 Promotion	-
4.2.5: Conversion and Upgrading	13
4.2.7: Recruitment	14
4.2.8 Key appointments	-
4.3: Training and Capacity Building	-
4.3.1 Orientation for Hospital Director and Selected Specialist	-
4.3.2 Pathways to Leadership for Health Transformation in Africa (PLHTA)	15
4.3.3 Internal Audit	-
4.3.4 Finance	-
4.3.5 Human Resource	-
4.3.6 Budget Training	-
4.3.8 QualityRights training	16
4.4 Study Leave-With-Pay	18
4.4.1 Breakdown Of Study Leave By Cadre.	19
4.5 Attrition	-
Leave Without Pay.	-
4.6 Transfers	20
4.7 Wastage	21
4.8 Causes of Vacation of Post:	22
4.9 Details of Vacation of Post	-

Table of Contents

4.10 Automation of the Attendance Book	23
4.11 Submission of Nominal to Controller and Accountant General Department.	-
4.12 Human Resource for Community Mental Health	-
Chapter 5: Health Technology And Infrastructure	25
5.1 Acquisition of Land for New Mental Health Hospitals	-
5.2 Accra Psychiatric Hospital	26
5.2.1 IT Infrastructure and Installations	-
5.2.2 Automation of Services at the Hospital	-
5.2.3 Infrastructural Development/Rehabilitation	-
5.2 Pantang Hospital	27
5.2.1 Land Acquisition and Encroachment Resolution:	-
5.4 Ankaful Psychiatric Hospital	-
5.5 Transport	28
5.6 Workshops on Psychotropic Medicine Access	29
5.7 Forecasting and Quantification of Psychotropic Medicines	30
5.8 Stock Count of Psychotropic Medicines at the Temporal Central Medical Stores	-
5.9 Distribution of Medicines	-
Chapter 6: Health Information & Service Delivery	33
6.1 Deployment of The Psychotropic Tracer Medicines List On DHIMS 2	-
6.2 Causes of psychiatric OPD attendance (2020-2022)	-
6.3 Admissions by psychological cases from (2021 - 2023) by regions	35
6.4 2022 Annual Performance Review of the Mental Health Facilities	36
6.5 Launch of Mental Health Terminologies in Akan	38
6.6 Launch of Mental Health Research Agenda	40
6.7 Conference On Information Sharing For Stakeholders In Mental Health Space In Ghana	41
6.8 MHA STRATEGIC PLAN VALIDATION MEETING	43
6.9 Health Promotion Activities	44
6.9.1 Virtual Seminars	-
6.9.2 Mental health awareness program in SHS	45
6.9.3 Show your love campaign.	-
6.9.4 The Inter-Medical Schools Public Speaking Competition	46
6.10 World mental health week celebration	-
6.11 World Bipolar Day	47
6.12 World Schizophrenia Day	-
6.13 The International Day Against Drug Abuse and Illicit Trafficking (World Drug Day)	48
6.14 World Suicide Prevention Day	-
6.15 Chief Executive working visit	-
CHAPTER 7: QUALITY IMPROVEMENT	52
Chapter 8: Challenges, Mitigating Strategies And Outlook For 2024	53
9.2 OUTLOOK FOR 2024	54
9.3 Acknowledgement	56

List of Tables

Table	Page
Table 4. 1 Three-year trend of MHA staff strength	9
Table 4. 2 Three-year trend of MHA casual workers	-
Table 4. 3 Number of staff appraised.	10
Table 4. 4 Three-year trend of promotions	11
Table 4. 5 Three-year trend of conversion and upgrading	-
Table 4. 6 Details of Conversion and Up-Grading	-
Table 4. 7 Recruitment	12
Table 4. 8 IST Programmes by the Facilities	14
Table 4. 9 Table showing the in-person training performance since inception.	15
Table 4. 10 Distribution of QR face-to-face Training by Region	-
Table 4. 11 Distribution by Stakeholders Trained as at Dec. 2023	16
Table 4. 12 Study leave with pay	-
Table 4. 13 Breakdown of study leave by cadre	17
Table 4. 14 Leave without pay	-
Table 4. 15 Cadre of staff granted leave without pay	18
Table 4. 16 TRANSFER OF STAFF	-
Table 4. 17 Wastage	20
Table 4. 18 Vacation of post	-
Table 4. 19 Details of Vacation of Post	-
Table 4. 20 Human Resource for Community Mental Health	22

List of Figures

Figure 1 Staff Compensation	6
Figure 2 ATTRITION.	17

Acronyms

AC	Audit Committee
AnPH	Ankaful Psychiatric Hospital
APH	Accra Psychiatric Hospital
AR	Ashanti Region
BAR	Brong Ahafo Region
BMC	Budget Management Centre
CAPEX	Capital Expenditure
CE	Chief Executive
CHAG	Christian Health Association of Ghana
DHIMS	District Health Information Management System
ECT	Electroconvulsive Therapy
GAMA	Greater Accra Metropolitan Area
GAR	Greater Accra Region
GHS	Ghana Health Service
GoG	Government of Ghana
HAMS	Health Administration Management System
ICT	Information Communication Technology
IGF	Internally Generated Funds
KATH	Komfo Anokye Teaching Hospital
KBTH	Korle-Bu Teaching Hospital
LI	Legislative Instrument
MEHSOG	Mental Health Society of Ghana
MHA	Mental Health Authority
MhGAP	Mental Health Gap Action Plan
MMDAs	Metropolitan, Municipal, District Assemblies
MoH	Ministry of Health
MoU	Memorandum of Understanding
NGO	Non-Governmental Organization
NHIS	National Health Insurance Scheme
OPD	Outpatient Department
PPME	Policy Planning Monitoring and Evaluation
PSP	Private Sector Participation
RMHCs	Regional Mental Health Coordinators
RMN	Registered Mental Nurse
SBS	Sector Budget Support
TFBH	Traditional and Faith Based Healers
TOT	Training of Trainees
TTH	Tamale Teaching Hospital
UER	Upper East Region
UHAS	University of Health and Allied Sciences
UWR	Upper West Region
WHO	World Health Organization

Executive Summary

This report provides a comprehensive summary of the activities undertaken by the Mental Health Authority (MHA) in Ghana throughout the year 2023. It highlights the significant achievements and challenges faced by the MHA in its mission to ensure a mentally healthy population, which is crucial for national development. The report details the Authority's vision, mission, statutory mandate, and the scope of its operations, including activities at the MHA Headquarters, the three Psychiatric Hospitals, and Community Mental Health Services across the country. Additionally, it underscores collaborative efforts with various stakeholders, partners, and civil society.

In 2023, the MHA made substantial progress across multiple fronts, underscoring its dedication to enhancing mental health care services in Ghana. Key achievements include:

1. STAKEHOLDER ENGAGEMENT AND STRATEGIC PLANNING:

- The MHA organized a stakeholder conference to foster inclusive decision-making processes in the mental health sector. This engagement led to the validation of its strategic plan, which outlines mental health initiatives for Ghana from 2023 to 2026.
- The inaugural Senior Managers Conference was held, bringing together key leaders within the Authority to discuss critical issues and develop actionable plans.
- Progress was made towards conducting a national census to identify mental health patients living in public places, enabling more targeted interventions and resource allocation.

2. INFRASTRUCTURE DEVELOPMENT:

- Through the Agenda 111 projects, significant attention was given to infrastructure development. The construction of specialist mental health hospitals in Yapala and Kumasi, with completion rates of 56.50% and 23.71% respectively as of November 2023, demonstrates the commitment to expanding access to quality mental health care across various regions of the country.

3. SERVICE DELIVERY ENHANCEMENTS:

- The MHA implemented several initiatives to improve mental health and psychosocial support services. These included schizophrenia awareness campaigns and patient satisfaction surveys aimed at raising awareness and enhancing patient experiences.

Publication of service delivery statistics provided valuable insights into trends in outpatient attendance, admissions, discharges, and relapses, supporting evidence-based decision-making.

4. OPERATIONAL EFFICIENCY:

- Despite challenges such as staff attrition and inadequate funding for essential medicines, the MHA adopted strategies to maintain operational efficiency. Efforts included strengthening the appraisal system, promoting eligible staff, and automating internal processes.

5. HEALTH INFORMATION MANAGEMENT:

- Collaboration with the Community Health Information Management (CHIM) led to the redesign of mental health reporting forms and the deployment of tracer medicines in DHIMS2, aimed at improving data collection, analysis, and reporting.

6. FINANCIAL MANAGEMENT:

- The MHA engaged in lobbying efforts to advocate for the inclusion of mental health services in the National Health Insurance Scheme (NHIS) benefit package, ensuring equitable access to mental health care for all Ghanaians.
- Prudent financial management practices were observed, including timely submission of budget performance reports and effective management of income and expenditure.

Looking forward to 2024, the MHA aims to build on its achievements and address ongoing challenges. Planned initiatives include clearing the streets of mentally ill patients, conducting comprehensive satisfaction surveys, strengthening community mental health activities, and establishing emergency management teams. Continued collaboration with stakeholders, capacity building, and enhancements to data systems will be integral to achieving these objectives.

Chapter 1: Background

The Annual Report of the Mental Health Authority (MHA) for 2023 provides an in-depth overview of the key activities, achievements, and challenges encountered by the Authority from January to December 2023. This report covers the operations of the MHA Headquarters, Psychiatric Hospitals, and Community Mental Health Care, while also acknowledging the significant contributions of various stakeholders and collaborators.

1.2 VISION

To ensure a mentally healthy population for national development.

1.3 MISSION

To promote mental health, prevent mental illness, and provide accessible, community-oriented, integrated, quality, and culturally appropriate mental health care to persons with mental illness.

1.4 CORE VALUES

- **TEAMWORK:** Fostering collaboration among staff and with external partners.
- **EMPATHY:** Understanding and sharing the feelings of patients and their families.
- **COMPASSION:** Demonstrating kindness and a strong desire to help those in need.
- **PROFESSIONALISM:** Upholding the highest standards of professional conduct.
- **EQUALITY:** Ensuring equal access to mental health services for all individuals.
- **RESPECT AND DIGNITY:** Treating all individuals with inherent worth and respect.

1.5 MANDATE

The Mental Health Authority derives its mandate from the Mental Health Act, 2012 (Act 846) and its Regulations, 2019 (LI 2385). The Authority is tasked with:

- Proposing, developing, and ensuring the implementation of mental health policies, protocols, and guidelines.
- Collaborating with regulatory bodies, other government agencies, NGOs, and CSOs.
- Providing service delivery through the three Psychiatric Hospitals and indirectly through other MOH agencies, private sector entities, quasi-government institutions, and traditional and faith-based centres.

1.6 SCOPE

The Mental Health Authority has both regulatory and service delivery roles:

- **REGULATORY ROLE:** The MHA collaborates with relevant regulatory bodies to ensure compliance with accreditation standards for staff and care quality.
- **SERVICE DELIVERY ROLE:** The Authority provides mental health services through psychiatric hospitals and collaborates with other service delivery agencies at the primary, secondary, and tertiary levels of care.

This chapter sets the stage for a detailed examination of the MHA's efforts throughout the year 2023, highlighting its commitment to improving mental health care in Ghana and addressing the challenges faced in achieving its mission.

Chapter 2: Leadership and Governance

2.0 GOVERNING BOARD

The governing board of the Mental Health Authority (MHA) derives its mandate from the Mental Health Act, 2012 (Act 846), which establishes the MHA as the agency responsible for mental health services in Ghana. The board plays a crucial role in shaping the direction of the Authority by establishing policies, making strategic decisions, and overseeing its activities. In 2023, the board convened four times to deliberate on significant matters pertinent to the Authority and the advancement of mental health in the country.

2.1 MANAGEMENT MEETINGS

To streamline its administration, the MHA has established several committees, including:

- **MENTAL HEALTH BOARD**
- **HEADS OF DIVISIONS COMMITTEE**
- **GENERAL DIRECTORS COMMITTEE**
- **ENTITY TENDER COMMITTEE**
- **AUDIT COMMITTEE**
- **BUDGET COMMITTEE**

These committees are integral to the effective governance and operational efficiency of the Authority. Table 2.1 summarizes the key indicators and accomplishments of meetings conducted over a three-year period, highlighting the consistent efforts to enhance mental health services.

TABLE 2.1 Summary of meetings organised.

Description	2021	2022	2023	Remarks
Board	2/4	3/4	4/4	Very satisfactory
Heads of Divisions	-	-	11/52	Was inaugurated in April 2023
General Directors	0/12	0/12	3/12	Was inaugurated in April 2023
Entity Tender	4/4	2/4	0/4	Organizational difficulties
Staff Durbar	1/4	3/4	3/4	Satisfactory
Budget	0/4	0/4	0/4	Organizational difficulties
Audit	2/4	0/4	2/4	Was re-inaugurated in September 2023

*The Entity Tender Committee is yet to be constituted according to the legislation.

2.2 SENIOR MANAGERS CONFERENCE

In the year under review, the MHA successfully organized its inaugural Senior Managers Conference. This conference was pivotal in bringing together senior managers from various divisions within the Authority to discuss and address critical issues impacting its operations. Key topics covered during the conference included:

- Leadership skills and effective management of personnel.
- Approaches to handling confrontations within the workplace.
- Review and reinforcement of the MHA’s Code of Conduct and Disciplinary Procedures.
- Operational concerns in hospitals such as staff satisfaction, patient feeding, staff welfare, and payroll analysis.

The conference culminated in the adoption of a resolution and the development of an action plan aimed at addressing the key issues identified. This initiative underscores the Authority's commitment to continuous improvement and effective governance.



Chapter 3: Financial Performance

This is the Financial Report for Mental Health Authority, Headquarters for the period starting from January 1st to December 31st, 2023. This report covers funds received as releases from the Government of Ghana and Donor support and balance brought forward from the previous period.

This report is inclusive of the Statement of Financial Position, Statement of Income and Expenditure, Cash Flow Statement, Bank Reconciliation and Extract of the Cash Book and the Bank Statement.

3.1 INCOME/INFLOWS

The Mental Health Authority began the year 2023 with an opening balance of One Million, Three Hundred and Sixty-One Thousand, One Hundred and Fifty-Nine Ghana cedis and Twenty-Nine Pesewas (GH¢1,361,159.29) which is the Cashbook balance for the period.

An amount of Nine Thousand, One Hundred and Sixty-Four Ghana Cedis (GH¢9,164.00) was received as repayment of salary advances for the year.

The Authority received an amount of Sixty-Three Thousand, Four Hundred and Forty-Four Ghana Cedis and Sixty-Two Pesewas (GH¢63,444.62) from Mr. Vincent I.O. Agyapong to support the purchase of Motor bikes for selected Mental Health nurses in remote areas to help facilitate their work as well as Inter-School Debate organised for some Selected universities in Ghana.

The Authority received an amount of Five Hundred and Sixty-Seven Thousand Eight Hundred and Ninety-Two Ghana Cedis and Eighty-Two Pesewas Only (GH¢567,892.82) from the Government of Ghana on the GIFMIS system as budgetary support for Goods and Services.

The Authority received an amount of Two Hundred Thousand Ghana Cedis and Eighty-Four (GH¢200,000.00) from the International Central Gospel Church (ICGC) Christ Temple, to support Mental Health Activities.

The Authority received an amount of Eight Million, Six Hundred and Forty Thousand, Five Hundred and Fifty-Seven Ghana Cedis and Sixteen Pesewas (GH¢8,640,557.16) from The Foreign Commonwealth Development Office (FCDO) as budget support for the 'Leave No One Behind Programme'.

The Authority also generated an amount of Two Thousand, Seven Hundred Ghana Cedis only (Ghc2,700.00) from the registration of staff for placement interviews for the period.

The Authority received an amount of One hundred and Fifty-Seven Thousand, One hundred and Sixteen Ghana cedis only (GHc157,116.00) from The World Health Organisation (WHO) to support the World Mental Health Day celebration in the Oti Region as well as Stakeholder Meeting.

The Authority received an amount of Thirty Thousand Ghana Cedis (GHc30,000.00) from Zoomlion Ghana Limited in support of Mental Health promotion.

3.2 EXPENDITURE/OUTFLOWS

The Authority recorded an amount of Six Million and Seventy-Nine Thousand, Three Hundred and Thirty-Four Ghana Cedis and Forty-Seven Pesewas (GHc6,079,334.47) as total expenditure (see Budget Status Report attached) from January to end of December 2023 Financial Year.

Payable balance as at the beginning of the year was Fifty-Seven Thousand, Five Hundred and Eight Ghana Cedis and Sixty-Five Pesewas (GHc57,508.65).

The Authority remitted an amount of One Million, One Hundred and Twenty Thousand Ghana Cedis (GHc1,120,000.00) to the three (3) psychiatric Hospitals and other facilities to enable them settle outstanding debts as well as support in the commemoration of the World Mental Health Day Celebration in the following proportion.

SN	NAME OF HOSPITAL	AMOUNT GHC
1	ACCRA PSYCHIATRIC HOSPITAL	400,000.00
2	PANTANG HOSPITAL	300,000.00
3	ANKAFUL PSYCHIATRIC HOSPITAL	300,000.00
4	PSYCHIATRIC ASSOCIATION OF GH.	50,000.00
5	KBTH- DEPT OF PSYCHIATRY	15,000.00
6	KATH-DEPT OF PSYCHIATRY	40,000.00
7	UNIVERSITY OF GHANA	15,000.00
	TOTAL	1,120,000.00

The expenditures incurred in the period under review were all incurred towards Employee Compensations, purchase of Goods and the provision of Services. These included Training and Conferences, Travels & Transport, Materials & Office Consumables, Utilities, Cleaning and Security Services etc.

The Authority did not receive any fund for Capital Expenditure in 2023 Financial Year.

3.3 ASSETS AND LIABILITIES

The Authority’s cashbook closing balance as at the end of December 2023 stood at Three Million and Two Hundred and Twenty-Six Thousand and Sixty-One Ghana cedis and Twenty-Seven Pesewas Only (GH¢3,226,061.27).

Also, an amount of Forty-Eight Thousand, Five Hundred and Fifty-Four Ghana Cedis (GH¢48,554.00) was the balance for salary advances given to some members of staff which they are paying off over a period.

Also, taxes amounting to Two Hundred and Thirty-Three Thousand, Two Hundred and Three Ghana Cedis and One Pesewas (GH¢233,203.01) was recorded and withheld but a total amount of Two Hundred and Three Thousand, two Hundred and Eighty-Three Ghana Cedis and Sixty-Two Pesewas (GH¢203,283.62) was remitted to the Ghana Revenue Authority with and an outstanding balance at the end of the period being Thirty Thousand, Seven Hundred and Fifty-Seven Ghana Cedis and Twenty-One Pesewas only (GH¢30,757.21).

BANK ACCOUNT DETAILS OF MHA

Account Name	Branch	Account Number	Purpose of Account	Balance as at 31st December, 2023 (GHc)
Mental Health Authority	Ecobank Ghana Limited HQ-Ridge	1441000851449	Operational Account	3,304,077.23
Mental Health Fund	Ecobank Ghana Limited A&C Mall, East Legon	0150134404640301	Mental Health Fund	8,884.58

3.4 PSYCHOTROPIC MEDICATION

In 2023, the Mental Health Authority (MHA) was allocated a budget of five million Ghana Cedis for the procurement of psychotropic medicines. This allocation aimed to ensure a steady supply of essential medications for mental health patients across the country.

No new tender process was initiated in 2023 due to the existing framework contracting arrangement established in 2022, which covered both 2022 and 2023. Under this arrangement, companies that won the bids in 2022 were offered the opportunity to supply the medicines again in 2023. This approach streamlined the procurement process and ensured continuity in the supply chain.

Companies that accepted the offer to supply psychotropic medicines in 2023 were scheduled to be awarded contracts starting January 2024. This proactive measure was intended to avoid disruptions and maintain the availability of essential medications for mental health care.

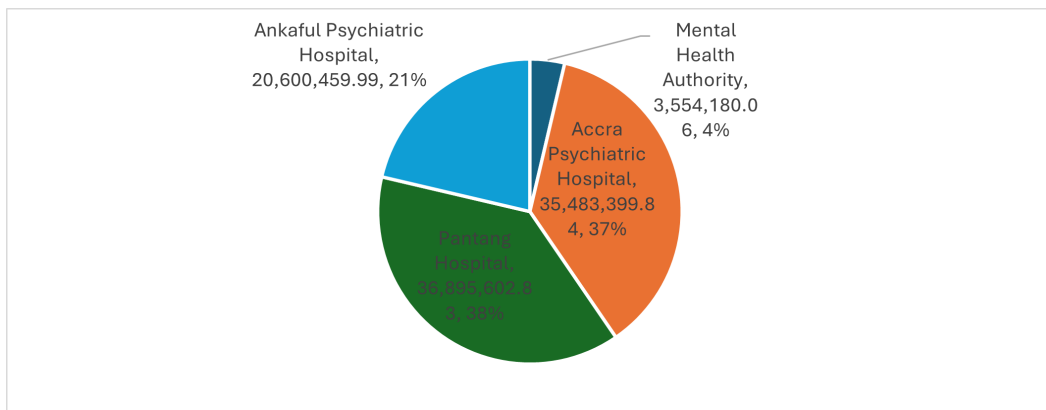
The table below provides a summary of the allocated budgets over a three-year period, illustrating the financial commitment towards mental health services:

YEAR	BUDGET RESENTED (GHS)	BUDGETARY ALLOCATION(GHS)	ACTUAL EXPENDITURE (GHS)	REMARKS
2023	26,687,000	5,000,000	Unknown	Award letters are yet to be signed
2022	13,353,600	5,000,000	6,118,900	No quote received for one (1) lot
2021	17,736,500	5,000,000	4,957,000	Quotes were received for all lots tendered.

3.5 STAFF COMPENSATION – GOG

In 2023, the MHA disbursed a total of GHS 96,533,642.72 through the Government of Ghana (GoG) for staff compensation. This amount was distributed with 75% allocated to Pantang Hospital and Accra Psychiatric Hospital, ensuring that a significant portion of the funds supported the largest mental health facilities in the country. The detailed breakdown of these disbursements, including monthly allocations per facility, is illustrated in Figure 2.

FIGURE 1 Staff Compensation



This financial performance demonstrates the MHA's dedication to securing and managing resources effectively to enhance mental health care delivery in Ghana, despite challenges and constraints. The efforts to ensure a consistent supply of medications and fair staff compensation are important steps towards improving the overall mental health system in the country.

3.6 INTERNAL AUDIT ACTIVITIES

The Audit Division conducted quarterly audits at the Mental Health Authority (MHA) – Headquarters and psychiatric hospitals, as mandated by Section 83 (3) of the Public Financial Management Act, 2016

(Act 921). The Audit Units within the MHA and its hospitals submitted quarterly reports to the Chief Executive and Hospital Directors, with copies to the MHA Audit Committee and the Internal Audit Agency. The audits revealed overall improvements in internal control measures across all facilities, indicating enhanced governance and risk management practices. However, the following areas need strengthening:

- Timely and comprehensive responses to internal audit queries
- Accurate and complete accounting record entries
- Adherence to the Public Procurement Act and MOH-ATF manual on financial management.

3.7 EXTERNAL AUDIT

The Ghana Audit Service staff conducted their mandated annual audit, and a management letter was issued addressing some identified weaknesses. The recommendations in this letter were properly implemented by management with the support of the Audit Committee.

3.8 AUDIT FOLLOW-UPS

The Internal Audit Division carried out several audit follow-ups during the period. These follow-ups addressed issues raised in the 2022 external and internal audit reports. The team visited Ankaful Psychiatric Hospital, Accra Psychiatric Hospital, and Pantang Hospital, issuing a status of implementation report to Management and the Audit Committee for their actions and decisions. Overall, the MHA and its hospitals fully implemented most of the recommendations and put measures to prevent reoccurrences.

3.9 ANNUAL STOCK TAKING

The Audit Division participated in the annual stock-taking exercise at MHA stores, including those within the hospitals. The team identified essential observations and made recommendations to enhance store management practices. These findings and suggestions were presented to MHA and hospital management to inform inventory management improvements and overall operational efficiency.

3.10 AUDIT TRAINING

Audit staff underwent comprehensive training programs organized by the Internal Audit Agency, Ministry of Health, and the Mental Health Authority to enhance their skills in the following areas:

- Risk-Based Auditing
- Procurement Auditing
- Audit Process Training

Most of the training was conducted on the job, where practical issues were identified and resolved, leading to valuable lessons learned.

Chapter 4: Human Resource for Health

As of December 31st, 2023, the Mental Health Authority (MHA) had a total of 1,847 staff members, comprising 1,098 females and 749 males. This workforce distribution reflects the MHA's commitment to maintaining a balanced and diverse team to support its operations and deliver quality mental health services across Ghana.

NURSING STAFF COMPOSITION

The workforce of the MHA is primarily composed of professional nurses, who represent the largest segment of employees. Specifically, professional nurses account for 41.463% of the total staff, numbering 769 individuals. This significant proportion underscores the crucial role that nurses play in the provision of mental health care.

Enrolled nurses form the second-largest group, constituting 7.85% of the workforce with a total of 145 individuals. Their role is essential in supporting the professional nurses and ensuring comprehensive care for patients.

MEDICAL STAFF

Medical doctors within the MHA make up 4.0% of the total staff, equating to 74 doctors. This group includes:

56 Medical Officers: General practitioners who provide primary and continuing care.

16 Psychiatrists: Specialists in mental health care, addressing complex psychiatric conditions.

2 Public Health Physicians: Experts focusing on the prevention of mental health issues and the promotion of mental well-being within the community.

GENDER DISTRIBUTION

The gender distribution within the MHA workforce is notable, with females representing 59.45% (1,098) and males 40.55% (749). This gender composition highlights the inclusive nature of the MHA, ensuring diverse perspectives and approaches in mental health care delivery.

TABLE 4.1 Three-year trend of MHA staff strength

S/N	Year	Number
1	2023	1847
2	2022	1999
3	2021	2070

The staff strength of the Mental Health Authority (MHA) experienced a decrease of 7.6%, equivalent to 152 individuals. This decline was primarily due to a high attrition rate, driven by health professionals migrating to Europe and other developed countries in search of better opportunities. Additionally, there was a notable increase in staff requests for transfers to join other sister agencies, which further impacted the overall staff count.

4.1 TEMPORARY WORKERS

To mitigate the effects of the reduced permanent workforce, the MHA employed a total of 83 casual workers who complemented the permanent staff in providing healthcare services. These temporary workers played a crucial role in maintaining service delivery standards during periods of staff shortages.

Table 4.2 presents a three-year trend of the casual staff, reflecting the MHA's strategic approach to managing workforce challenges through the engagement of temporary employees. This strategy not only helps to fill immediate gaps but also provides flexibility in managing human resources effectively.

TABLE 4.2 Three-year trend of MHA casual workers

S/N	Year	Number
1	2023	83
2	2022	86
3	2021	26

4.2 PERFORMANCE

4.2.1: REVIEW OF STAFFING NORMS OF THE PSYCHIATRIC HOSPITALS

A proposal to review the staffing norms of the psychiatric hospitals has been submitted. Management has decided to review this proposal for potential implementation in 2024. This review aims to ensure that staffing levels are appropriate and adequate to meet the demands of mental health service delivery, enhancing the overall efficiency and effectiveness of the psychiatric hospitals.

4.2.2: PROMOTION, CONVERSION, AND UP-GRADING POLICY

A zero draft of the Promotion, Conversion, and Up-Grading Policy has been prepared. However, financial approval is pending to finalize this policy. Management has agreed to prioritize this initiative for implementation in 2024. The policy aims to provide a structured pathway for career progression, recognizing and rewarding staff for their contributions, and ensuring that they have opportunities for professional growth and development.

4.2.3: STAFF PERFORMANCE APPRAISAL

During the review period, a total of 32 staff members at the MHA HQ underwent performance appraisals. These appraisals are essential for evaluating individual performance, identifying areas for improvement, and aligning personal goals with the organizational objectives of the MHA. The appraisal process also plays a critical role in staff development, providing feedback and guidance to help employees enhance their skills and advance their careers within the Authority. Table 4.3 presents the number of staff appraised within the MHA HQ.

TABLE 4.3 Number of staff appraised

S/N	Division	Number of Staff	Number Appraised	Percentage of Staff Appraised
1	Administration	21	19	90.47
2	Technical	8	3	37.5
3	Finance	4	3	75
4	Rights and Quality	2	1	50
5	Audit	4	3	75
6	PPME	6	3	50
7	Pharmacy	1	0	0
Total		46	33 32	71.74

4.2.4 PROMOTION

In 2023, a total of 180 duly qualified staff members were promoted within the Mental Health Authority. This marks a notable achievement in the Authority's efforts to recognize and reward the dedication and expertise of its personnel. However, the decrease in the number of promotions compared to previous years can be attributed to a significant number of eligible staff members becoming disengaged. This disengagement may have stemmed from factors such as limited career progression opportunities or external migration for better prospects. Table 4.4 provides a three-year trend of staff promotions, illustrating the fluctuations in promotion rates and helping to identify patterns and areas for improvement in the Authority's promotion policies.

TABLE 4.4 Three-year trend of promotions

Year	Number of Staff Promoted
2023	180
2022	320
2021	292

4.2.5: CONVERSION AND UPGRADING

A total of 40 staff members were considered for conversion or upgrading. These individuals were selected based on their commitment to professional development and the relevance of their studies to the needs of the organization. The following report provides a three-year trend analysis of staff who were upgraded during this period, as outlined in Table 4.5.

TABLE 4.5 Three-year trend of conversion and upgrading

Year	No of Staff Converted/Upgraded
2023	40
2022	29
2021	44

4.2.6 DETAILS OF CONVERSION AND UP-GRADING

TABLE 4.6 Details of Conversion and Up-Grading

S/N	Cadre	2022	2023
1	Administrative Manager	1	
2	Estate Manager	1	
3	Nursing Officer	17	30
4	Physician Assistant	3	
5	Specialist -Psychiatrist	2	5
6	Specialist (Nurse)	1	
7	Specialist (Public Health)	1	
8	Staff Midwife	1	
9	Staff Nurse	2	
10	Hospitality Manager		1
11	Human Resource Manager		1
12	Procurement Manager		1
13	Public Health Officer		2
	Total	29	40

4.2.7: RECRUITMENT

A total of 42 staff members were successfully recruited via the Ministry of Health Recruitment Portal. These individuals were selected based on their qualifications, experience, and suitability for the available positions within the organization. Table 4.7 provides a breakdown of the cadre of staff recruited during the review period.

TABLE 4.7 Recruitment

S/N	Cadre	2022	2023
1	Comm. Mental Health Officer	1	
2	Enrolled Nurse	1	
3	Medical Officer	13	8
4	Staff General Nurse	2	6
5	Staff Mental Nurse	27	27
6	Staff Midwife	3	1
	Grand Total	47	42

4.2.8 KEY APPOINTMENTS

During the year under review, the Mental Health Authority (MHA) appointed a substantive Chief Executive Officer. This appointment was necessitated by the compulsory retirement of the former and pioneering Chief Executive of the Authority, ensuring a seamless transition in leadership.

4.3: TRAINING AND CAPACITY BUILDING

The MHA is committed to enhancing the skills and capabilities of its staff through various training and capacity-building initiatives. To ensure the efficient operation of the Call Centre, the MHA requested Service Personnel with a background in Psychology. Five individuals were subsequently assigned and underwent a two-day Psychological First Aid training session. Prior to this, they participated in a communication skills training session to enhance their effectiveness in their roles.

4.3.1 ORIENTATION FOR HOSPITAL DIRECTOR AND SELECTED SPECIALIST

A Leadership and Management Skills workshop was conducted for the newly assigned Hospital Director of Ankaful Psychiatric Hospital and six selected Psychiatrists from Accra Psychiatric Hospital and Pantang Hospital, including Clinical Coordinators. The objectives of the session were to:

- Familiarize officers with the challenges associated with their new roles as team leaders and spending officers.
- Enable officers to quickly grasp administrative practices and internal business procedures within the MHA.
- Equip participants with relevant information to function effectively and efficiently.

4.3.2 PATHWAYS TO LEADERSHIP FOR HEALTH TRANSFORMATION IN AFRICA (PLHTA)

Two officers, the Heads of Pharmacy and Rights and Quality Divisions, participated in Cohort 3 of the PLHTA program, while the Head of Human Resources took part in Cohort 4. This program aims to develop leadership skills essential for health transformation in Africa.

4.3.3 INTERNAL AUDIT

Officers from the Audit Division attended a capacity-building workshop covering various disciplines, including:

- Based Internal Auditing (RBIA) organized by the Internal Audit Agency.
- Project Appraisal.
- Procurement Audit.
- Project Audit.
- Public Financial Management (PFM) Act.

4.3.4 FINANCE

Officers from the Finance Division participated in training sessions organized by the Ministry of Health, covering:

- Microsoft Excel Tool for Accounting.
- New Financial Reporting Template.
- Fixed Assets Register.

4.3.5 HUMAN RESOURCE

To enhance the leadership skills of the Human Resource department's staff, internal capacity-building sessions were conducted. Topics covered included:

- Leadership Practices
- Workload Indicators of Staffing Norms (WISN) and
- Green Human Resource Management Practices.

4.3.6 BUDGET TRAINING

The Budget team, comprising officers from Finance, PPME, and Human Resource departments, participated in the 2024 Planning and Budgeting workshop organized by the Ministry of Health. This training aimed to prepare the team for the upcoming fiscal year's planning and budgeting processes.

4.3.7 IST PROGRAMMES BY THE FACILITIES

Various IST programmes were organized by MHA facilities to improve the quality of care provided. Table 4.8 below provides a detailed overview of these IST programmes conducted by the facilities.

TABLE 4.8 IST Programmes by the Facilities

IST PROGRAMME	NUMBER PARTICIPANT
Building leadership in health care	25
Dementia training	40
Emergency preparedness to respond to Lassa fever outbreak	17
Ghana integrated financial management system	11
Improving patience care	31
Infection safety handling of shapes	21
Lassa fever 2 Health belief model	7
Management of emergency in labour	119
National health insurance training	28
Nursing dental cases and management of dental cases	31

4.3.8 QUALITYRIGHTS TRAINING

The MHA independently funded a QualityRights training session held in Koforidua from September 25th to 29th, 2023. The objectives of this training were to:

1. Train personnel in various facilities and communities to promote QualityRights.
2. Equip trainees with strategies to create awareness and ensure the rights of persons with psychosocial, intellectual, and cognitive disabilities are respected, promoted, and fulfilled.
3. Train selected faith-based healers (e.g., Mt. Horeb Prayer Centre, Mamfe Akuapem) on practices to ensure the rights of their clients are respected, promoted, and fulfilled. This was in response to findings from the 2022 Shantha Rau Barriga/Human Rights Watch visits.

In total, fifty-two (52) individuals were trained, comprising thirty (30) males and twenty-two (22).

TABLE 4.9 Table showing the in-person training performance since inception

SEX	PERFORMANCE					Total
	2019	2020	2021	2022	2023	
Male	65	0	472	0	156	693
Female	43	0	330	0	110	483
Total	108	0	802	0	266	1176

TABLE 4.10 Distribution of QR face-to-face Training by Region

REGION	MALE	FEMALE	TOTAL
Accra	82	71	153
Ahafo	42	34	76
Ashanti	35	30	65
Bono	25	13	38
Bono East	14	6	20
Central	96	85	181
Eastern	80	47	127
North-East	14	0	14
Northern	62	8	70
Oti	69	40	109
Savannah	55	19	74
Upper East	55	21	76
Upper West	39	7	46
Volta	49	28	77
Western	19	16	35
Western North	12	3	15
TOTAL	748	428	1,176

TABLE 4.11 Distribution by Stakeholders Trained as at Dec. 2023

Category of Key Stakeholders	Male	Female	Total
Health Workers	378	241	619
Health Tutors	50	21	71
Social Welfare	37	17	54
CHRAJ	16	3	19
GES Teachers	18	11	29
LEAP	6	3	9
Police	14	12	26
Member of Partner Organisation	15	11	26
TFBHs	101	61	162
Service Users	101	48	149
Media	2	1	3
Legal Practitioners	6	3	9
Total	744	432	1176

4.4 STUDY LEAVE-WITH-PAY

To improve the quality of care by enhancing staff performance, 13 officers were granted approval to undertake further studies with study leave-with-pay. This initiative supports the professional development of staff, enabling them to acquire advanced skills and knowledge that they can apply in their roles within the MHA. Table 4.11 below details the staff members who were granted study leave-with-pay.

TABLE 4.12 Study leave with pay

Year	Number
2023	13
2022	25
2021	9

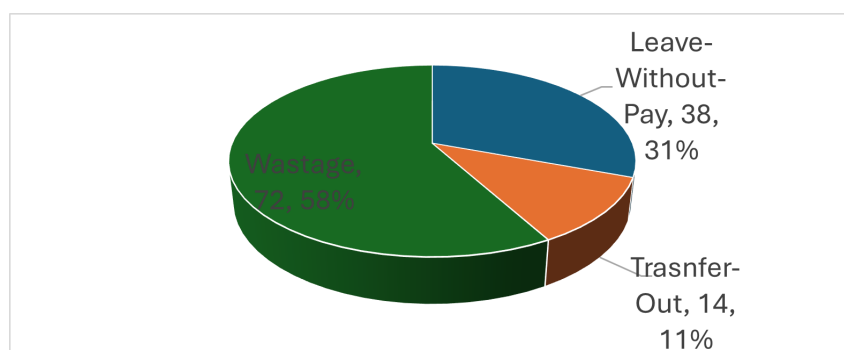
4.4.1 BREAKDOWN OF STUDY LEAVE BY CADRE

TABLE 4.13 Breakdown of study leave by cadre

S/N	Cadre	Number
1	Enrolled Nurse	6
2	Professional Nurse	5
3	Occupational Therapy Assistant	1
4	Administrative Manager	1
	Total	13

4.5 ATTRITION

Figure 2 Attrition



LEAVE WITHOUT PAY

TABLE 4.14 Leave without pay

Year	Number
2023	52
2022	44
2021	7

TABLE 4.15 Cadre of staff granted leave without pay

S/N	Cadre	2023	2022
1.	Administrative Manager		1
2.	Health Information Officer		1
3.	Hospital Orderly	1	1
4.	Laboratory		1
5.	Finance	1	
6.	Labourer		1
7.	Medical Officer	3	4
8.	Pharmacist		1
9.	Physician Assistant	3	2
10.	Professional Nurse	43	31
11.	Specialist	1	
12.	Human Resources Manager		1
	Total	52	44

4.6 TRANSFERS

During the year 2023, there was a notable trend of officers seeking transfers to join other sister agencies, primarily the Ghana Health Service. A total of twenty (20) officers were transferred out of the organization, while only six (5) individuals were transferred in. This movement indicates a significant outflow of talent that needs to be addressed to maintain operational stability and capacity.

TABLE 4.16 Transfer of Staff

Cadre	In-coming		Out-going	
	2023	2022	2023	2022
Accountant		1		2
Certified Anaesthetist				1
CHMO				2
Enrolled Nurse				2

Midwife	1			
Finance Officer				1
Medical Officer		2	1	1
Physician Assistant			1	2
Professional Nurse	1	2	13	25
Audit Officer			1	
Deputy Director			1	
Administrative Manager			1	
Transport Officer				1
Hospitality Manager			1	
Mortuary Attendant			1	
Grand Total	2	5	20	37

4.7 WASTAGE

During the reporting period, the Mental Health Authority (MHA) experienced a total of 123 cases of workforce wastage. The primary causes of wastage were categorized into vacations of posts, resignations, retirements, and death.

Vacations of Posts: This was the leading cause of wastage, accounting for 70 cases, which represents approximately 56.91% of the total wastage. This high percentage highlights a significant area of concern that requires attention to ensure staff retention and continuity of care.

Resignations: Following closely behind, resignations accounted for 34 cases, constituting about 27.64% of the total wastage. This indicates a considerable number of staff leaving voluntarily, suggesting potential issues related to job satisfaction, career development opportunities, or poor work environment.

Retirement: Retirement contributed to 18 cases, making up approximately 14.63% of the wastage. This is a natural attrition category, but it underscores the need for succession planning and recruitment strategies to replace experienced staff members.

Death: There was only one case of wastage due to death, representing about 0.81% of the total. While this is the smallest category, it nonetheless impacts the overall workforce stability. Table 4.17 presents a three-year trend of wastage categorized by their causes.

TABLE 4.17 Wastage

S/N	Type of Wastage	2023	2022	2021
1	Death	1	2	8
2	Retirement	18	14	20
3	Vacation of Post	70	59	41
4	Resignation	34	17	14
	Total	123	92	83

4.8 CAUSES OF VACATION OF POST:

The table 4.18 below outlines the main causes of vacation of post.

TABLE 4.18 Vacation of post

CAUSES OF VOP		
CAUSES	2023	2022
Absence from duty	21	24
Failure to resume duty from Annual Leave	7	6
Failure to resume duty from LWP	2	2
Leave Without Pay-without Advance Notice	0	3
Resignation without notice	11	24

4.9 DETAILS OF VACATION OF POST

The 59 officers who vacated post spread across 10 different occupational cadres and the professional nurses constituted the majority.

TABLE 4.19 Details of Vacation of Post

S/N	Cadre of staff	2023	2022
1	Diet Cook	1	1
2	Dietician	1	1
3	Enrolled Nurse	1	3
4	Health Service Administrator		1

5	Hospital Orderly	1	1
6	Midwife		1
7	Occupational Therapist		1
8	Physician Assistant	5	1
9	Professional Nurse	56	48
10	Accountant	1	
11	Clinical Psychologist	1	
12	Radiographer	1	
13	Administrative Manager	2	
15	Technical Officer-Laboratory		1

4.10 AUTOMATION OF THE ATTENDANCE BOOK

To enhance productivity and punctuality among staff, the Mental Health Authority (MHA) has collaborated with the IT unit to develop an innovative Attendance Book app. This app allows staff to conveniently clock in and out, thus promoting efficiency in time management. The operationalization of the app is scheduled to commence in 2024. Prior to its launch, both management and staff underwent sensitization sessions to ensure smooth adoption and usage of the app.

4.11 SUBMISSION OF NOMINAL TO CONTROLLER AND ACCOUNTANT GENERAL DEPARTMENT

In line with institutional policy, organizations are required to submit the Nominal Roll to the Controller and Accountant General Department by the 15th of the ensuing month. The MHA has proactively set an internal deadline to submit the Nominal Roll by the 10th of each month. This commitment to an earlier submission ensures timely and accurate reporting of staff information, facilitating smoother administrative processes and enhancing operational efficiency. The MHA successfully adhered to this self-imposed deadline throughout the reporting period.

4.12 HUMAN RESOURCE FOR COMMUNITY MENTAL HEALTH

The distribution of human resources for community mental health across various regions highlights significant disparities in workforce allocation. The data includes different roles such as Psychiatrists, Clinical Psychologists, Community Psychiatric Officers (CPOs), Community Psychiatric Nurses/Registered Mental Nurses (CPN/RMN), Community Mental Health Officers (CMHOs), Occupational Therapists (OTs), Psychiatric Social Workers (PSWs), General Social Workers (GEN. SWs), and Speech Therapists.

The Ashanti region boasts the highest total number of mental health professionals, with a workforce of 485. In stark contrast, the Savannah region has the lowest total number, with only 55 mental health professionals. These figures underscore significant disparities in the distribution of mental health resources, highlighting potential challenges in ensuring equitable access to mental health services across regions.

TABLE 4.20 Human Resource for Community Mental Health

REG.	PSYCHIA TRIST	CLIN. PSYC	CPO	CPN/ RMN	CMHO	OT	OT ASST.	PSW	GEN. SW	SPEECH THERAPIST	TOTAL
Ahafo	0	0	2	66	11	0	0	0	8	0	87
Ashanti	6	7	3	391	74	2	0	2	0	0	485
Bono	0	1	3	130	45	0	0	0	11	0	190
Bono East	0	1	4	85	43	0	0	0	0	0	133
Central	1	5	1	171	36	0	0	0	0	0	214
Eastern	1	2	0	254	56	0	0	0	0	1	314
Greater Accra	19	33	8	274	78	1	0	0	36	0	449
Northeast	0	0	2	25	20	0	0	0	5	0	52
Northern	4	2	0	145	85	0	0	0	21	0	257
Oti	0	0	1	70	19	0	0	0	0	0	90
Savannah	0	0	1	22	23	0	0	0	9	0	55
Upper East	1	1	2	62	73	0	0	0	2	0	141
Upper West	0	2	4	51	57	0	0	0	51	0	165
Volta	3	2	2	127	46	0	0	0	0	0	180
Western	0	3	0	139	34	0	0	0	14	0	190
Western North	0	0	0	91	14	0	0	0	40	0	145
TOTAL	35	59	33	2103	714	3	0	2	197	1	3,147

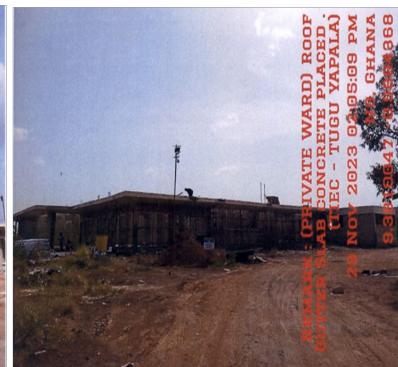
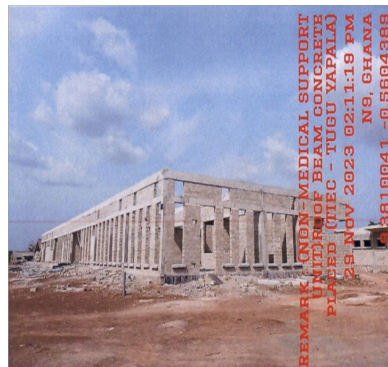
Chapter 5 Health Technology And Infrastructure

5.1 ACQUISITION OF LAND FOR NEW MENTAL HEALTH HOSPITALS

As part of the Agenda 111 initiative, the Mental Health Authority (MHA) has made significant strides in expanding mental health infrastructure across Ghana. In collaboration with local landowners and relevant government officials, the MHA has successfully acquired land for the development of specialized mental health hospitals in the middle and northern regions of the country.

In the middle belt, a 31-acre plot of land has been secured in Ejisu-Onwe, near Kumasi in the Ashanti Region. This site is earmarked for the construction of a state-of-the-art psychiatric hospital with a capacity of 90 beds. This facility is expected to serve the local community and the surrounding areas, significantly enhancing mental health care provision in the region. As of November 2023, the project has achieved approximately 23.71% completion.

Similarly, in the northern belt, an additional 30-acre parcel of land has been acquired for the same purpose, located at Tugu-Yapala along the Tamale-Yendi Highway in the Tamale Metropolis. Construction progress indicates that approximately 56.50% of the project has been completed as of November 2023.



Non-Medical Support Unit

Private Ward

5.2 ACCRA PSYCHIATRIC HOSPITAL

5.2.1 IT INFRASTRUCTURE AND INSTALLATIONS

The hospital's IT infrastructure includes 60 desktop computers, 1 server, 13 laptops, 20 tablets, and 67 desktop wireless phones. However, eight computers malfunctioned during the year due to power fluctuations and faulty UPS. Nonetheless, the LightWave Hospital Information Management System (LHIMS) has been running well with 24-hour support services. Following the outsourcing of internet connectivity management from NITA, the hospital now relies on MTN Fiber for internet services in some offices. Additionally, MTN TurboNet is used as an alternative internet service provider, with six TurboNet routers serving as backup for internet services. Furthermore, additional AirtelTigo lines were acquired for internal communication, and a toll-free line was added for the hospital. As of December 31, 2023, a total of 73 computers were operational, compared to 49 the previous year.

5.2.2 AUTOMATION OF SERVICES AT THE HOSPITAL

The LightWave Health Information Management System (LHIMS) has been implemented in both the outpatient department (OPD) and inpatient areas, providing 24-hour support services. This computerization aims to enhance productivity and efficiency across all hospital operations. Additionally, there is a need to acquire more computers to supplement the current inventory.

5.2.3 INFRASTRUCTURAL DEVELOPMENT/REHABILITATION

During the year under review the hospital undertook infrastructural projects to enhance its facilities. These included trimming tree branches for safety, general repairs and servicing of all air-conditioners, servicing fire extinguishers, repairing roof leakages at selected areas, tiling the two public urinals, and replacing old signage and directional signs in the hospital.



Replacement of old signage and serviced air conditioners at the hospital

5.3 PANTANG HOSPITAL

During the year under review, the hospital undertook several infrastructure development projects aimed at improving its facilities and addressing various operational challenges. The key initiatives included:

5.3.1 LAND ACQUISITION AND ENCROACHMENT RESOLUTION:

The hospital successfully acquired additional land to expand its infrastructure. There was also engagement with stakeholders to address and resolve issues related to land encroachment, ensuring the protection of the hospital's property.

5.3.2 WALL CONSTRUCTION:

Significant progress was made in constructing the hospital's perimeter wall, enhancing security and delineating the hospital's boundaries.

5.3.3 INFRASTRUCTURE UPGRADES:

Re-roofed the Assessment Ward to provide a safer and more comfortable environment for patients and staff. Completed the rehabilitation of the Rehab facility, improving its functionality and usability for patient care.

5.3.4 INTERNAL INFRASTRUCTURE IMPROVEMENTS:

Reshaped and levelled internal roads to enhance accessibility and movement within the hospital premises. Applied the first layer of bitumen to the internal roads, laying the foundation for further road improvements. Despite these significant improvements, staff accommodation remains a critical concern. Currently, only 19% of the hospital staff are adequately housed, highlighting a pressing need for additional accommodation facilities to support the well-being and retention of the hospital's workforce.

5.3 ANKAFUL PSYCHIATRIC HOSPITAL

5.4.1 ESTATES MANAGEMENT

During the year under review, the hospital undertook various maintenance works, both minor and major, across the facility. Despite these efforts, significant challenges persist. These challenges include unabated land encroachments, very weak OPD basement columns, a horrible internal road network, old and dilapidated staff accommodation, and stalled renovation works at Volta Ward due to procurement issues. However, the kitchen renovation works are almost complete.

The issue of land encroachment has escalated to a point where regional authorities seem indifferent

to appeals for action. Recently, the regional security coordinator showed some interest and took steps to address the issue, but these measures fell short of the necessary deterrent action, which would involve demolition of the encroachments.

Regarding the OPD basement, an initial integrity assessment was conducted by the Architectural and Engineering Services Limited (AESL) in 2020, and the report was submitted to the Ministry through MHA. Recently, MHA requested a reassessment due to the time lapse since the original report. AESL was contacted, and the reassessed report has been received and submitted to MHA. This report indicated that the structure is in distress and requires immediate actions to maintain functionality while long-term solutions are sought. These immediate actions include propping the columns, diverting all watercourses away from the basement, and plastering all exposed columns.

5.4.2 LIGHTWAVE HEALTH INFORMATION MANAGEMENT SYSTEM

The year 2023 saw the full implementation of the Lightwave Health Information Management System (LHIMS). All the financial and logistical modules have been activated and put are functioning effectively. This has helped in checking leakages in the system, however further updates are necessary to fully customize it to reflect the full range of psychiatric care. The Fixed Assets Coordinating Unit is however, yet to be fully implemented, although the team has been constituted.

Whist the previously operated HAMS software largely helped deal with leakages in finances and logistics, many other transactions still took place outside the system. The introduction of the LHIMS therefore offered the opportunity for all processes to be customised. Management therefore took a decision to actively facilitate the installation and invest in the in the training of staff to ensure the optimal use of the software to control waste and leakages.

5.5 TRANSPORT

During the year under review, the Mental Health Authority (MHA) focused on maintaining and reporting the status of its transport fleet across various units and hospitals.

MHA HEADQUARTERS

The MHA headquarters began the year with a fleet comprising five (5) vehicles and three (3) motorbikes. Unfortunately, one motorbike was stolen during the year, and a report was filed with the Police for investigation.

ACCRA PSYCHIATRIC HOSPITAL

APH during the year under review reported a fleet size of thirteen (13), made up of eight vehicles, one tricycle, and four motor bikes. The vehicles consist of four (4) double cabin pick-ups, three (3) buses, one (1) salon car, four (4) motorcycles and a tricycle. The Hospital is still in dire need of utility vehicles. The unserviceable vehicles are yet to be disposed of as approval has not yet been obtained from the Chief of Staff.

ANKAFUL PSYCHIATRIC HOSPITAL:

The transport unit at Ankaful Psychiatric Hospital (APH) reported a total fleet size of eleven (11) vehicles. This fleet includes:

- Three (3) double cabin pick-ups
- One (1) cross-country vehicle
- One (1) saloon car
- One (1) hatchback
- Two (2) buses
- Three (3) tricycles

PANTANG HOSPITAL:

Pantang Hospital reported a total fleet size of fifteen (14) vehicles, further contributing to the transport resources available for patient and staff transportation, as well as operational needs.

SUMMARY OF FLEET SIZE:

Table 5.1 provides a detailed overview of the total fleet size across the MHA headquarters, the three psychiatric hospitals, and the various regions.

TABLE 5.1 Fleet size of MHA and Regions

	MHA	APH	PANTANG	ANPH
Pickups	4	4	3	3
Cross country	2			1
Salon	0	1	2	2
Buses	0	3	2	2
Motorbikes	3	4	2	
Tricycles	0	1	1	3
Tractor	0		3	
Ambulance			1	
Total	9	13	14	11

5.6 WORKSHOPS ON PSYCHOTROPIC MEDICINE ACCESS

The Mental Health Authority (MHA), with support from GSD, conducted two workshops to address issues related to the access of psychotropic medicines. The workshops aimed to establish a procurement strategy within budget limits and ensure an uninterrupted supply of these essential

medicines by 2024. Additionally, the workshops focused on strengthening monitoring processes. Key problems identified included the integration of medicine management, over-reliance on mental health nurses for data management, and inconsistencies in data.

5.7 FORECASTING AND QUANTIFICATION OF PSYCHOTROPIC MEDICINES

The MHA actively participated in a forecasting exercise conducted by the Supplies, Stores, and Drug Management (SSDM) division of the Ghana Health Service (GHS), with support from PATH. This exercise utilized data from various levels of healthcare to accurately forecast the requirements for psychotropic medicines.

5.8 STOCK COUNT OF PSYCHOTROPIC MEDICINES AT THE TEMPORAL CENTRAL MEDICAL STORES

A team from MHA conducted a stock count of psychotropic medicines at the Temporal Central Medical Stores (TCMS) to provide an up-to-date inventory record, identify any discrepancies in inventory management system reports, and determine which supplies were outstanding.

The team found that there were 25 different psychotropic medicines available, with samples of some medicines taken by the FDA for quality testing. Some routine psychotropic medicines were out of stock, and certain medicines awarded on contract in January 2023 were only supplied in November 2023. However, no expired medicines were found during the stock count.

5.9 DISTRIBUTION OF MEDICINES

During the year under review, two medications procured in 2022—Carbamazepine 200mg tablets and Benztropine 2mg Injection—could not be supplied. Additionally, three other medicines—Quetiapine 200mg tablets, Fluoxetine 20mg Capsules, and Risperidone 2mg Tablets—were supplied in November 2023 but could not be issued out as they were still awaiting clearance by the FDA.

All other medicines received during the year were issued upon request through the Ghana Health Integrated Logistics Management Information System (GHILMIS). Table 5.2 provides detailed information on the quantities of medicines received and issued out during the year under review.

TABLE 5.2 Quantities of medicines received and issued out (January to December 2022)

NO	DESCRIPTION	UNIT OF MEASURE	OPENING STOCK	QUANTITY RECEIVED	QUANTITY AVAILABLE	QUANTITY ISSUED	CLOSING BALANCE
1	Amitriptyline 25mg	Tablet	886,900	1,190,000	2,076,900	993,300	1,083,600
2	Aripiprazole 10mg tab	Tablet	60,510	0	60,510	60,510	0
3	Benztropine 2mg inj	Ampoule	10	0	10	10	0
4	Benztropine 2mg tab	Tablet	0	10,000	10,000	9,600	400
5	Carbamazepine 200mg tab	Tablet	64,000	0	64,000	64,000	0
6	Chlorpromazine inj	Ampoule	0	12,000	12,000	10,500	1,500
7	Clozapine 5mg	Tablet	800	10,000	10,800	10,400	400
8	Diazepam 5mg tab	Tablet	214,000	500,000	714,000	254,500	459,500
9	Diazepam Injection	Ampoule	18,090	30,000	48,090	47,780	310
10	Fluoxetine 20mg cap	Capsule	18,570	300,000	318,570	18,670	299,900
11	Fluphenazine Inj	Ampoule	4,600	40,000	44,600	15,280	29,320
12	Haloperidol 5mg Inj	Ampoule	20,600	35,000	55,600	48,000	7,600
13	Haloperidol 5mg tab	Tablet	936,000	1,000,000	1,936,000	680,000	1,256,000
14	Haloperidol Decanoate 50mg	Ampoule	1,500	20,000	21,500	12,300	9,200

15	Lamotrigine 100mg tab	Tablet	0	24,000	24,000	12,732	11,268
16	Lamotrigine 50mg tab	Tablet	0	24,000	24,000	24,000	0
17	Lithium Carbonate 300mg	Tablet	10,500	6,000	16,500	12,900	3,600
18	Olanzapine 10mg tab	Tablet	0	1,194,000	1,194,000	924,000	270,000
19	Olanzapine 5mg tab	Tablet	48,000	994,000	1,042,000	794,000	248,000
20	Naloxone Inj	Ampoule	1,120	0	1,120	690	430
21	Paliperidone 75mg inj	Syringe	8	74	82	82	0
22	Paliperidone 100mg inj	Syringe	20	69	89	89	0
23	Paliperidone 150mg inj	Syringe	2	24	26	26	0
24	Phenobarbitone 200mg Inj	Ampoule	0	500	500	420	80
25	Phenobarbitone 30mg tab	Tablet	940,000	1,000,000	1,940,000	940,500	999,500
26	Quetiapine 200mg tab	Tablet	0	60,000	60,000	100	59,900
27	Risperidone 2mg	Tablet	305,100	1,000,000	1,305,100	306,100	999,000
28	Risperidone 1mg	Tablet	0	600,000	600,000	405,000	195,000
29	Sodium Valproate 300mg tab	Tablet	3,120	0	3,120	3,120	0
30	Sodium Valproate 500mg tab	Tablet	385,580	0	385,580	316,480	69,100
31	Trihexylphenidyl 5mg tab	Tablet	843,000	0	843,000	843,000	0

Chapter 6: Health Information & Service Delivery

6.1 DEPLOYMENT OF THE PSYCHOTROPIC TRACER MEDICINES LIST ON DHIMS 2

The Mental Health Authority (MHA) has been actively working to enhance mental healthcare services, ensuring the availability of treatment options across various healthcare facilities nationwide. A crucial component of this effort is the accessibility and monitoring of psychotropic drugs, essential for addressing mental health issues. Despite these efforts, challenges in accessibility and monitoring persist.

To address these challenges, the MHA collaborated with the Center for Health Information Management (CHIM) to integrate psychotropic tracer medicines into the District Health Information Management System (DHIMS2). This initiative is designed to improve the monitoring of medication availability and enhance decision-making processes in mental health services.

A meeting was convened to discuss the deployment of psychotropic tracer medications in DHIMS2, with key stakeholders from various organizations in attendance. The discussion points included:

- The psychotropic tracer medicines list.
- The importance of tracking medication availability.
- Strategies to address shortages in psychotropic medicines.

The meeting concluded with agreements to strengthen advocacy efforts and to hold further discussions with DHIMS2 and Lightwave teams for potential integration of the psychotropic tracer medicines list into the system.

6.2 CAUSES OF PSYCHIATRIC OPD ATTENDANCE (2020-2022)

Table 6.1 illustrates the trend of the top ten causes of psychiatric outpatient department (OPD) attendance from 2021 to 2023 in Ghana. Schizophrenia, schizotypal, and delusional disorders had the highest number of diagnoses, with a total of 26,401 cases in 2023, an increase from 24,790 cases recorded in 2022.

TABLE 6.1 Causes of psychiatric OPD attendance (2020-2022)

No.	Disease Conditions	2021			2022			2023		
		M	F	Total	M	F	Total	Male	F	Total
1	Schizophrenia, schizotypal and delusional disorders	9809	10946	20755	11549	13241	24790	12,162	14,239	26,401
2	Epilepsy	10351	9202	19553	10198	8910	19108	9,090	8,126	17,216
3	Mental disorders not specified above	3698	5513	9211	4764	6296	11060	4,450	6,017	10,467
4	Depression	1496	4009	5505	1737	4537	6274	1,798	4,618	6,416
5	Mental Disorders due to other psychoactive substance use	4206	370	4576	4811	438	5249	4,953	600	5,554
6	Mental Disorders due to Alcohol use	3787	582	4369	3773	546	4319	3,202	563	3,765
7	Bipolar Disorder	1267	1903	3170	1444	2185	3629	1,686	2,571	4,257
8	Generalized Anxiety	1353	2177	3530	1181	1856	3037	1,413	2,338	3,751
9	Dementia	693	1327	2020	797	1441	2238	830	1,549	2,379
10	Delirium	539	566	1105	565	557	1122	499	473	972

6.3 ADMISSIONS BY PSYCHOLOGICAL CASES FROM (2021 - 2023) BY REGIONS

The Mental Health Authority (MHA) has compiled data on the admissions of psychological cases across various regions from 2021 to 2023. Table 6.2 provides a detailed breakdown of these admissions, highlighting significant regional differences in the number of cases.

The data indicates that the Greater Accra region recorded the highest number of psychological case admissions, with a total of 1,358 cases over the three-year period. The Ashanti region followed as the middle-ranking region with a total of 1,101 cases. The Northern region observed the lowest number of admissions, with a total of 79 cases.

TABLE 6.2 Admissions by psychological cases (2021-2023)

Regions	2021	2022	2023
Ahafo	66	84	69
Ashanti	845	1011	1101
Bono	266	199	262
Bono East	209	234	297
Central	372	562	580
Eastern	510	476	403
Greater Accra	942	1155	1358
North, East	91	105	155
Northern	117	91	79
Oti	102	96	100
Savannah	40	151	83
Upper East	254	184	253
Upper West	84	123	130
Volta	390	445	372
Western	154	177	196
Western North	134	156	116

6.4 2022 ANNUAL PERFORMANCE REVIEW OF THE MENTAL HEALTH FACILITIES

In 2023, the Mental Health Authority (MHA) conducted its annual performance review, providing an opportunity for stakeholders in the mental health sector to evaluate achievements, identify challenges, and highlight areas needing improvement. The theme for the 2023 review was **"Fostering Community Well-Being Through Progressive Mental Health Awareness Initiatives."** The event attracted participants from various health-related institutions and agencies and featured presentations, interactive sessions, and discussions over two days.

Among the notable achievements highlighted during the review was the successful launch of the Prof EFB Forster Public Lecture Series, a significant step in raising awareness and promoting discussions on mental health issues. Additionally, the distribution of motorbikes to districts in select regions was seen as a positive move to enhance mobility and accessibility of mental health services. Plans to integrate mental health care into the National Health Insurance Scheme (NHIS) by April 2024 were also a key focus, aiming to make mental health services more affordable and accessible to the broader population.

However, the review also addressed ongoing challenges that continue to hamper the effectiveness of mental health care delivery. Inadequate funding remains a major issue, limiting the ability to expand and improve services. Infrastructure deficiencies, such as outdated or insufficient facilities, were also noted, along with high staff attrition rates, which strain the capacity to provide consistent care.

Presentations from various institutions provided a comprehensive overview of successes in areas like governance, human resource management, and service delivery. Despite these successes, challenges such as land encroachment on mental health facilities, financial constraints, and insufficient infrastructure were highlighted. These issues highlighted the need for continued efforts and strategies to overcome obstacles and enhance the quality and reach of mental health services in Ghana.

Looking forward, the review set the stage for future initiatives focused on improving mental health services across the country. There was a strong emphasis on fostering partnerships with both local and international stakeholders and enhancing community well-being through increased mental health awareness and education.

The review session provided a platform for stakeholders to engage in meaningful discussions and share insights on advancing mental health care in Ghana. The discussions and recommendations from the review are expected to lead to:

- Improved mental health outcomes.
- Enhanced well-being for individuals with mental health conditions.
- Better collaboration among mental health institutions.

Gallery showing participants at the Review.



6.5 LAUNCH OF MENTAL HEALTH TERMINOLOGIES IN AKAN

The Mental Health Authority (MHA) marked a significant milestone on November 14, 2023, with the launch of the book "Mental Health Terminologies in Akan." This project, initiated five years ago, aimed to translate essential mental health terminologies into Akan, Ghana's most widely spoken local language. The translation effort, led by a team of mental health and language experts, was designed to break linguistic barriers, reduce stigma, and promote cultural sensitivity in mental health care.

Event Highlights

The launch event was attended by a diverse group of stakeholders, including representatives from the MHA, psychiatric hospitals, international organizations, non-governmental organizations (NGOs), tertiary institutions, and mental health consultants.

Key Addresses

Prof. Pinaman Appau, CEO of the MHA: In her address, Prof. Appau emphasized the book's significance in advancing mental health care in Ghana. She highlighted how the translated terminologies would help bridge the communication gap between mental health professionals and patients, thereby improving understanding and care.

Madam Estelle Appiah, Chairperson of the MHA Board: Madam Appiah underscored the book's role in fostering inclusivity and building a well-informed community. She pointed out that by making mental health terminologies accessible in Akan, the MHA is promoting greater engagement and understanding among the Akan-speaking population.

Expert Contributions

Several distinguished speakers at the event highlighted the project's impact on promoting cultural sensitivity and linguistic inclusivity in mental health services:

Prof. Akwasi Osei (Former CE): Spoke on the importance of cultural sensitivity in mental health treatment and how the translated terminologies would facilitate better patient-provider communication.

Prof. Opanyin Agyekum (Lead Consultant): Discussed the linguistic aspects and process of the translation project and its significance in making mental health concepts more relatable to Akan speakers.

Dr. Anastasia Yirenkyi: Highlighted the potential of the book to reduce stigma by demystifying mental health issues in the local language.

Dr. George Kodie Frimpong: Emphasized the educational benefits of the book for both healthcare providers and the public.

Overall, the launch of "Mental Health Terminologies in Akan" is a landmark achievement in the MHA's efforts to enhance mental health care in Ghana. By addressing linguistic barriers and promoting cultural inclusivity, this initiative is expected to lead to better mental health outcomes and a more informed and supportive community.

Gallery showing participants at the launch



6.6 LAUNCH OF MENTAL HEALTH

Research Agenda

In the health and sciences field, research is fundamental to addressing challenges, particularly in mental health, where evidence-based data is crucial. Historically, Ghana's mental health sector has faced a significant data deficiency, impeding effective policy formulation and service delivery. To address this issue, the Mental Health Authority (MHA), in collaboration with the Research and Development Division of the Ghana Health Service and other stakeholders, launched the National Mental Health Research Agenda.

Purpose and Alignment

The National Mental Health Research Agenda is strategically aligned with the Mental Health Policy Document (2019–2030) and the WHO-AIMS assessment for Ghana conducted in 2013. This agenda aims to provide a structured framework for conducting meaningful research across six key areas, thereby generating the data needed to inform policies, improve mental health services, and promote better health outcomes.

Launch Event Highlights

The launch event underscored the critical role of the research agenda in addressing the data scarcity that has long plagued Ghana's mental health sector. Key highlights of the event included:

Opening Remarks: The event began with opening remarks from the Deputy Chief Executive of MHA, who highlighted the importance of the research agenda in bridging the data gap and advancing mental health care in Ghana.

Panel Discussion: A panel discussion led by Dr. Joseph Osafo focused on essential topics such as collaboration among institutions, securing funding for research initiatives, and the impact of research on policymaking. The panel comprised experts from various fields who provided insights into overcoming challenges in mental health research.

Unveiling of the Research Agenda: The event culminated with the formal unveiling of the National Mental Health Research Agenda. This moment symbolized a strong commitment to advancing mental health research in Ghana and fostering a data-driven approach to mental health policy and practice.

The launch of the National Mental Health Research Agenda marks a significant milestone in Ghana's efforts to enhance mental health services through evidence-based research. By addressing the longstanding data deficiency, the agenda is expected to facilitate informed decision-making, improve policy formulation, and ultimately lead to better mental health outcomes for the Ghanaian population.

The MHA, along with its partners, remains dedicated to supporting and advancing mental health research. This initiative represents a proactive step towards ensuring that mental health policies and services are grounded in reliable and comprehensive data.

Gallery showing participants at the launch



6.7 CONFERENCE ON INFORMATION SHARING FOR STAKEHOLDERS IN MENTAL HEALTH SPACE IN GHANA

The Mental Health Authority (MHA) hosted a one-day conference aimed at enhancing coordination and collaboration within the mental health sector. This event brought together a diverse group of stakeholders from both public and private sectors involved in mental health service delivery. The primary objectives were to strengthen working relationships among key partners, explore avenues for effective collaboration, and improve the synchronization of information exchange.

CONFERENCE OBJECTIVES AND AGENDA

The conference was designed to address the following:

- **Bringing Together Stakeholders:** The event provided a platform for various stakeholders to meet, network, and discuss their roles in mental health service delivery.
- **Strengthening Partnerships:** Emphasis was placed on building stronger working relationships among key partners to ensure a more cohesive approach to mental health care.
- **Exploring Collaboration Opportunities:** The conference aimed to identify new and effective ways for stakeholders to collaborate, ensuring that mental health services are more integrated and accessible.
- **Enhancing Information Exchange:** Improving the flow of information between stakeholders was a key focus, ensuring that everyone involved in mental health care is well-informed and aligned in their efforts.

PRESENTATIONS AND DISCUSSIONS

Throughout the conference, various presentations covered a wide range of topics relevant to the mental health landscape in Ghana:

- **Mental Health Landscape:** An overview of the current state of mental health services in Ghana was provided, highlighting challenges and opportunities.
- **Planned Activities and Initiatives:** Organizations such as Ghana Somubi Dwumadie, BasicNeeds, and the Christian Health Association of Ghana (CHAG) shared their planned activities and initiatives, focusing on how these efforts align with the broader goals of the MHA.
- **Decentralization of Specialist Healthcare:** Discussions emphasized the need to decentralize specialist mental health care, making these services more accessible to communities across the country.
- **Integration of Mental Health into Healthcare Packages:** The importance of integrating mental health services into general healthcare packages was highlighted, ensuring that mental health is treated as an integral part of overall health care and aligned in their efforts.

KEY OUTCOMES AND COMMITMENTS

The conference concluded with stakeholders demonstrating a strong commitment to improving mental health outcomes in Ghana through collaborative efforts. Several key areas for future collaboration were identified, including:

- Enhancing the decentralization of specialist mental health services to improve access across different regions.
- Integrating mental health services into broader healthcare packages to ensure comprehensive care.
- Strengthening the mechanisms for information exchange and coordination among stakeholders.

The one-day conference on information sharing for stakeholders in the mental health space marked a significant step towards improving coordination and collaboration in Ghana's mental health sector. By bringing together a diverse group of stakeholders and fostering open dialogue, the MHA successfully laid the groundwork for more integrated and effective mental health services. The commitment to collaborative efforts demonstrated at the conference is expected to lead to better mental health outcomes for individuals across the country.

Galley showing participants at the meeting



6.8 MHA STRATEGIC PLAN VALIDATION MEETING

The Mental Health Authority (MHA) convened a meeting to validate its new Strategic Plan (SP) for the period 2023-2026. The initial four-year Strategic Plan, developed in 2019, concluded in 2022. To ensure continuity in the implementation of the Mental Health Policy, a new Strategic Plan has been formulated for 2023-2026, incorporating revisions and updates from the previous plan.

MEETING OBJECTIVES AND PARTICIPANTS

The validation meeting aimed to refine the objectives, strategies, and actions outlined in the new Strategic Plan to address ongoing and emerging challenges in mental health services. Stakeholders from various sectors within the mental health field participated, ensuring that the new plan aligns with the overarching 12-year Mental Health Policy (2019-2030).

MEETING OBJECTIVES AND PARTICIPANTS

The meeting featured a series of presentations, group working sessions, and group presentations. Key focus areas included:

- **Reducing Stigma:** Strategies to measure and effectively reduce the stigma associated with mental health conditions.
- **Improving Financing:** Enhancing financial mechanisms to support mental health services.
- **Expanding Access to Services:** Increasing the availability and accessibility of mental health services across different regions.
- **Enhancing Governance:** Strengthening the governance structures within the MHA to ensure efficient and effective service delivery.
- **Strengthening Human Resources:** Developing and implementing training programs to enhance the skills and capabilities of mental health professionals.

KEY RECOMMENDATIONS

Participants provided valuable input, resulting in several key recommendations:

- **Measuring Stigma Reduction:** Developing metrics and tools to measure progress in reducing mental health stigma.
- **Decentralizing Services:** Expanding mental health services to ensure they are accessible at the community level.
- **Enhancing Staff Training:** Implementing comprehensive training programs for mental health professionals to improve service delivery.

The meeting concluded with assurances that the feedback and recommendations provided would be incorporated into the Strategic Plan. There was a strong call to action for all stakeholders to actively contribute to advancing mental health services in Ghana.

6.9 HEALTH PROMOTION ACTIVITIES

6.9.1 VIRTUAL SEMINARS

As part of its efforts to raise awareness about mental health, the MHA organized a series of monthly virtual seminars throughout 2023. These seminars, each lasting between 1.5 to 2 hours, were designed to educate the public on various contemporary mental health topics and were accessible via Zoom.

KEY FEATURES OF THE VIRTUAL SEMINARS:

- **Moderator:** Dr. Yaw Amankwa Arthur, Deputy Director of Health Information at MHA, moderated the sessions.
- **Expert Panels:** The seminars featured panels of experts, including psychiatrists, psychologists, sociologists, lawyers, and care providers.
- **Attendance:** On average, each seminar attracted around 150 participants, with the highest attendance reaching 450.
- **Feedback:** Participants provided positive feedback, praising the educational value of the seminars and suggesting more such discussions in the future.

Success Factors:

The success of the virtual seminars was attributed to several factors:

- **Relevant Topics:** Selection of contemporary and pertinent mental health topics.
- **Clear Objectives:** Well-defined goals for each seminar.
- **Engagement:** Extensive interaction between participants and facilitators.
- **Publicity:** Effective promotional efforts to attract participants.
- **Moderator's Guidance:** Dr. Arthur's effective moderation ensured smooth and engaging discussions.

The following is a list of topics covered during the virtual seminars along with online links to the recordings of each session:

- Managing stress and its effects on our relationships
- The rewards and regrets of snooping on your partner's phone? Your mental well-being matters.
- Are you coping or crumbling? Choosing the right strategies in times of stress and anxiety.
- Sex in marriage - managing stress, emotions and maintaining psychological well-being.
- Sex and psychological well-being (Part 2).
- Parenting in the 21st Century and its mental health implications. What parents and guardians need to know!
- Parenting in the 21st Century and its mental health implications. What parents and guardians need to know! (PART 2)
- Mental health reflection of attachments in Adult Relationship
- Students' life and Mental Health, Assisting Parents and Staff with Resource Strategies to avert a crisis.

6.9.2 MENTAL HEALTH AWARENESS PROGRAM IN SHS

The Mental Health Authority (MHA) initiated a "Senior High Schools Mental Health Educational Campaign" to raise awareness about mental health issues among students. The campaign reached several high schools in Accra, including Accra Wesley Girls, Presbyterian Boys' School, Odorgono Secondary School, and Osu Presbyterian Secondary. Similar educational initiatives were conducted across the country, aiming to educate young people about mental health, reduce stigma, and promote healthy mental practices.

6.9.3 SHOW YOUR LOVE CAMPAIGN

In February, the Mental Health Authority launched the "Show Your Love" campaign to foster compassion and support for individuals living with mental health disorders. This initiative encouraged the public to express love and support, particularly around Valentine's Day, aiming to improve the recovery and well-being of those with mental health challenges. The campaign's objective was to create a more inclusive and supportive community, emphasizing the importance of showing love and care to everyone, regardless of their mental health status.

6.9.4 THE INTER-MEDICAL SCHOOLS PUBLIC SPEAKING COMPETITION

The 10th edition of the Inter-Medical Schools Public Speaking Competition was held in November 2023, with a focus on the role of telemedicine and technology in mental health care delivery. The competition was meticulously organized, featuring protocols for registration, order of presentation, scoring criteria, IT support, and the introduction of judges. The School of Medical Sciences at the University of Cape Coast emerged victorious in this edition.

Winners of the competition are awarded fully sponsored elective placements at hospitals in Dublin, Ireland, providing them with valuable international experience. Sponsored by St. Patrick's University Hospital and Dalhousie University, the competition involves all seven medical schools in Ghana and aims to increase interest in psychiatry among medical students. This event not only fosters public speaking and critical thinking skills but also highlights the importance of mental health in medical education.

SCHOOL	POINTS	POSITION
School of Medical Sciences – UCC	88.1	1st
School of Medicine – UHAS	86.1	2nd
School of Medicine - UD	85.5	3rd
School of Medicine and Dentistry – KNUST	84.0	4th
University of Ghana Medical School	82.0	5th
Accra College of Medicine	79.8	6th
Family Health Medical School – Accra	77	7th

6.10 WORLD MENTAL HEALTH WEEK CELEBRATION

The 2023 World Mental Health Day celebration in Ghana focused on the theme "**Mental Health is a Universal Human Right.**" Recognizing the significant gaps in mental health care, especially in underserved regions like the Oti Region, the Mental Health Authority (MHA) decided to hold the celebration there.

This event adopted a community-based approach, encompassing a week-long series of activities designed to engage the local population directly. Activities included community engagements, radio discussions, school sensitizations on substance misuse, stress management presentations for health staff, user forums, outreach to faith-based centres, and health talks in churches.

The objectives of these activities were to raise awareness, educate the public about mental health, promote human rights, change perceptions, reduce stigma, encourage help-seeking behaviours, and enhance community support for individuals with mental disorders and their caregivers. The week-long program commenced with a joint press launch in Accra and was subsequently rolled out in four districts of the Oti Region.

Chiefs and stakeholders participated actively in the Mental Health Week celebration. Interactive sessions facilitated meaningful engagement and feedback. Despite the positive response, there was a recognized need for more education and sensitization efforts. Feedback from prayer camps highlighted varying treatment quality and the persistence of chaining, underscoring the need for education on human rights violations. Concerns were also raised about the attitudes of health staff, leading to a recommendation for anti-stigmatization workshops. Students advocated for the inclusion of mental health education in the school curriculum. Despite prevailing knowledge gaps and negative attitudes, communities expressed enthusiasm for the program, emphasizing the importance of intensified educational and awareness initiatives for behavioural and attitudinal change.

6.11 WORLD BIPOLAR DAY

On March 30th, the Mental Health Authority observed World Bipolar Day by organizing an educational seminar at Accra High School. The event aimed to raise awareness of bipolar disorder among students and staff. Key speakers included Dr. Yaw Amankwa Arthur, Mr. Samuel Hanu, Ms. Lilian Ama Afun, and Miss Esinam Dzrah, who shared her personal experience.

Approximately 600 students attended the seminar, which featured presentations on mental health basics, Bipolar Affective Disorder, and the role of psychologists in managing bipolar disorder. Miss Dzrah's interview provided insight into living with bipolar disorder, highlighting the importance of support networks. The interactive session addressed student questions on topics such as absent-mindedness, substance abuse, hereditary factors of mental illness, introversion, and migraine. Participants gained a better understanding of bipolar disorder, learned self-help strategies, and were encouraged to seek help proactively. Some students requested psychological first aid for personal issues, which the team provided.

6.12 WORLD SCHIZOPHRENIA DAY

On May 24th, 2023, the Mental Health Authority observed World Schizophrenia Day with the theme "Celebrating the Power of Community Kindness." The Chief Executive issued a press statement to media outlets, providing evidence-based information and contact details of professionals for public discourse. A press engagement session was held at the Ministry's conference hall in Accra, attended by key figures in mental health and media representatives. Messages from the Technical Director, MHA Board Chair, and the Chief Executive emphasized kindness, empathy, and support for individuals with schizophrenia. Solidarity messages were received from stakeholders such as NGOs, WHO, GHS, PAG, and GPA. The focus was on fostering acceptance, understanding, and support to break down barriers faced by individuals with schizophrenia in society. The event concluded with extensive media interaction, highlighting the importance of spreading awareness and advocating for the rights and well-being of those living with schizophrenia.

6.13 THE INTERNATIONAL DAY AGAINST DRUG ABUSE AND ILLICIT TRAFFICKING (WORLD DRUG DAY)

The International Day Against Drug Abuse and Illicit Trafficking, also known as World Drug Day, is observed annually to raise awareness about the risks and effects of drug abuse and illicit trafficking. The United Nations emphasizes preventive programs and collaborative efforts to achieve a drug-free global society. On this day, the UN Office on Drugs and Crime (UNODC) discusses ongoing drug-related issues and advocates for the protection of vulnerable groups. The Mental Health Authority collaborated with the Narcotics Control Commission to commemorate the occasion with a week-long program. Activities included the launch of the day, a walk against stigmatization and discrimination of those with substance use disorder, and media engagements featuring mental health professionals discussing drug abuse and trafficking. The event was successful, and future collaborative engagements are recommended to ensure broader participation.

6.14 WORLD SUICIDE PREVENTION DAY

The Mental Health Authority Commemorated World Suicide Prevention Day on September 10th, 2023, at the Prempeh Assembly Hall in Kumasi, Ghana, with the theme **"Creating Hope Through Action."** The event aimed to raise awareness about suicide prevention and gather support for the MHA's advocacy efforts to save lives and instill hope. To amplify public interest, the MHA issued a detailed press statement on September 6th, providing guidance to the media and enlisting the expertise of 28 professionals to contribute to discussions. Additionally, the MHA released audiovisual materials in four languages (Akan, Ewe, Ga, and Hausa) on social media, focusing on suicide prevention and seeking help. A week-long media engagement ensued in Kumasi, featuring physical appearances and radio interviews with various media outlets, including Angel TV and FM, Fox FM, Oyerepa FM, Opemsuo FM, and New Mercury FM, among others, to educate the public on suicide prevention.

6.15 CHIEF EXECUTIVE WORKING VISIT

Upon assuming office, the Chief Executive embarked on a working visit with a team to the Central and Oti Regions, as well as Pantang Hospital in the Greater Accra Region. These visits aimed to strengthen collaboration, improve the decentralization of mental health care, and enhance the quality of services in these regions. The visit included interactions with key mental health institutions and professionals. The places visited included Ankaful Psychiatric Hospital, Edumfa Prayer Camp, and Jesus Divine Healing Temple, as well as the Regional Health Directorate in the Central Region. In the Oti Region, the team visited the Regional Coordinating Council, Office of the Regional Minister, Regional Health Directorate, and districts including Krachi Nchumuru, Krachi East, Krachi West, Nkwanta North, and Nkwanta South.

These visits were instrumental in identifying challenges and opportunities for improvement in mental health service delivery, and they fostered a spirit of collaboration and commitment among stakeholders to enhance mental health care in Ghana.

Gallery of selected places visited



6.16 TECHNICAL WORKING GROUP SESSION FOR DZRAMDO PROJECT

The Mental Health Authority (MHA) held four Technical Working Group sessions to develop a comprehensive plan, working guide, and proposal for the Dzramdo Project. This initiative aims to restore dignity to individuals with mental illnesses found in public spaces.

The sessions were focused on several key objectives:

- Developing a detailed action plan for the project's implementation.
- Creating a working guide to ensure consistent and effective execution.
- Preparing a proposal to present to selected organizations for potential support and funding.

During these meetings, the team addressed various aspects of the project, including the identification of target populations, strategies for engagement, and methods for providing necessary support and care. The collaborative efforts aimed to ensure that the project would not only address immediate

needs but also contribute to long-term improvements in the lives of those affected.

The Dzramdo Project represents a significant step forward in the MHA's mission to support individuals with mental health issues, emphasizing the importance of dignity, care, and community integration. Through these technical sessions, the MHA aims to secure the necessary resources and partnerships to make this project a success, ultimately transforming the mental health landscape in Ghana.

Photos during the working sessions



6.17 TECHNICAL WORKING GROUP SESSION FOR COMMUNITY MENTAL HEALTH POLICY

The Mental Health Authority (MHA) convened a Technical Working Group session to advance the development of a Community Mental Health Policy. During this session, the team produced a draft concept note, which is now available for review. This draft concept note outlines the key components and strategic directions necessary for implementing effective community mental health initiatives.

6.18 MENTAL HEALTH SCREENING

As part of its commitment to mental health awareness and support, the MHA conducted mental health screenings for students and teachers during the grand finale of the inter-second-cycle public speaking competition held at the Accra International Conference Centre. A total of 171 individuals were screened for depression, anxiety, stress, and gambling issues.

The screening process identified several students and teachers with severe and extremely severe symptoms, who were subsequently offered psychological support. This initiative highlights the MHA's proactive approach in addressing mental health issues among young people and educators, ensuring that those in need receive timely and appropriate care.



6.19 SUPPORT FOR VICTIMS OF THE AKOSOMBO DAM SPILLAGE

In response to the Akosombo Dam spillage, the Mental Health Authority (MHA), in collaboration with the Psychiatric Association of Ghana, the Ghana Psychological Association, the Mental Health Nurses Society, and the Institutional Care Division of the Ghana Health Service, provided crucial psychological support to affected individuals.

The support initiative took place on the 23rd and 24th of October 2023, focusing on the three most impacted districts: South Tongu (Adidome), Central Tongu (Sogakope), and North Tongu (Battor and Mepe). The multidisciplinary team offered psychological assessments, counselling, and emotional support to help victims cope with the traumatic effects of the spillage. This coordinated effort underscores the MHA's commitment to addressing mental health crises and providing comprehensive care to communities in distress.



CHAPTER 7: Quality Improvement

7.1 INFECTION PREVENTION AND CONTROL

Regarding infection prevention and control, training sessions were conducted in APH for the catering staff on hand hygiene, kitchen and food hygiene, and waste management.

7.2 PATIENTS AND STAFF SAFETY

In terms of patients and staff safety, screening for selected conditions was carried out among staff in APH, and those with positive results or adverse findings were managed accordingly. Additionally, 150 staff from high-risk units and departments received training on violence and aggression prevention and management, particularly from patients. Moreover, 240 staff underwent training on customer relations and care. Fire extinguishers installed across all wards and departments were refilled and serviced to ensure operational readiness.

Additionally, there were seventeen (17) reported incidents related to the services provided, characterized by attacks on staff by aggressive patients and communication breakdowns. These incidents resulted in injuries such as bites and broken fingers, as well as damage to medical glasses and mobile phones. Some incidents also involved destruction of personal property. Affected staff received necessary support and care. A total of fifteen (15) staff members were affected, with 5 personal properties damaged. Fortunately, no patients sustained injuries from these incidents, though all reported incidents were either harmful or potentially harmful.

AnPH during the year under review recorded various adverse incidents. Firstly, there was one incident related to general or special nutrition prescriptions. Additionally, there was one reported patient fall. Again, two incidents involving infrastructural challenges, specifically with ECG machines, water supply, heating, and ventilation systems were reported. Furthermore, one incident was linked to bed and service availability, highlighting ongoing challenges in bed availability for in patients.

Behavioural issues were notably prevalent. Although there were no incidents of rude or reckless staff behaviour or staff assault, there were significant patient-related issues. Specifically, there were 29 incidents of uncooperative or non-compliant patients, 27 incidents of verbal or physical assaults by patients toward staff, and 18 incidents involving destructive behaviour, self-harm, or aggression towards other patients or objects. Finally, there was one incident involving errors in medication and intravenous fluid (IVF).

Chapter 8: Challenges, Mitigating Strategies And Outlook For 2024

Table 8.1 presents challenges and mitigating strategies faced by the Authority Headquarters as well as the three psychiatric hospitals.

TABLE 7.1 Challenges and mitigating strategies

CHALLENGES	MITIGATING STRATEGIES
Inadequate funding for mental health activities	The MHA will continue advocating for government budget allocations and to prioritize mental health funding in national budgets. Forming partnerships with international donor agencies, NGOs, philanthropic foundations, and private sector entities interested in mental health can supplement government funds and provide additional funding sources. Again, the Authority plans to implement innovative financing mechanisms like advocating for the establishment of the mental health levies or taxes on specific goods and services could generate a regular revenue stream for mental health.
Poor Internal Road network	The MHA will continue efforts to securing funding specifically designated for road network improvements
Hospital land encroachment	Pantang Hospital took initiative by reaching out to the Ministry of Health to speed up the compulsory acquisition process for acquiring the frontage. Additionally, seek approval from both the Ministry of Health and the Governing Board of the Mental Health Authority for securing a commercial loan dedicated to acquiring the frontage.

Inadequate Vehicles	Appealed for the provision of vehicles to the Hospital from the Ministry of Health (MoH). Maintained the overage vehicles of the hospital to ensure that we had the means of transport during the period.
High attrition rate among nurses and lack of financial clearance to recruit equally important staff like orderlies and security staff.	Liaise with MOH on more innovative ways to attract and retain staff.
Lack of psychotropic medication	MHA will collaborate with government and stakeholders to ensure the timely procurement of psychotropic medicine. Lobby the MOH to improve on budgetary provision and release of funds for the drugs. Strengthen engagement with pharmaceutical suppliers to consider more interest in the products within the country.

9.2 OUTLOOK FOR 2024

This section outlines the Mental Health Authority's (MHA) strategic plans and goals for 2024, focusing on leadership, governance, service delivery, workforce development, psychotropic medications, technologies, and health financing.

LEADERSHIP AND GOVERNANCE

- **Mental Health Review Tribunal:** The MHA will continue coordinating the work of the Mental Health Review Tribunal, with each committee conducting at least two visits in 2024. The Tribunal will review cases referred to it.
- **Legislative Amendments:** Proposed amendments will be submitted to the Attorney General's Department for drafting instructions.
- **Quality Improvement Team:** A functional Quality Improvement Team will be formed at MHA to oversee activities of teams in the facilities.
- **Guidelines Development:** The MHA will develop draft Quality Improvement and complaint management guidelines for management's consideration.
- **Engagement with MoH and NHIS:** The MHA will work with the Ministry of Health (MoH) and the National Health Insurance Scheme (NHIS) to ensure regular payment of claims for mental health services included in the NHIS benefit package.

SERVICE DELIVERY

- **Psychiatric Emergency Management:** Establish and operationalize Psychiatric Emergency Management Teams in four regions.
- **Observation of Mental Health Days:** Mental health-related days will be observed to raise awareness.

- **Leadership and Management Training:** Provide training for leadership and management.
- **Regional Mental Health Subcommittees:** Establish subcommittees in WHO-DG SIMH regions (Oti, Western North, Ahafo, and Savannah).
- **Public Relations and Community Engagement:** Strengthen public relations and community mental health activities, including routine monitoring and data validation.

HEALTH WORKFORCE/ DEVELOPMENT

- **QualityRights E-Training:** Conduct QualityRights E-training for staff.
- **Capacity Building:** Focus on ICT, data and record management, and grant proposal writing.
- **Performance Planning:** Strengthen the use of the Staff Performance Planning, Monitoring, and Assessment Tool.
- **Workload Indicators of Staffing Need (WISN):** Build capacity to apply WISN in facilities for manpower determination.
- **Hospital Development:** Facilitate the completion of two psychiatric hospitals and the redevelopment of Accra Psychiatric Hospital (APH).
- **Policy Reviews:** Review the Code of Conduct, Disciplinary Procedures, Training and Capacity Building Policy, and Scheme of Service for management positions.
- **Annual Compensation Budget:** Prepare the budget and determine power needs for new psychiatric hospitals.

PSYCHOTROPIC MEDICATIONS AND TECHNOLOGIES

- **Supply Collaboration:** Collaborate with MoH for adequate and regular supply of psychotropic medications.
- **Information System Strengthening:** Enhance the mental health information system within Ghana's National Health Information System.
- **Psycho Tracer Medicine List:** Deploy the psycho tracer medicine list on DHIMS 2 and improve mental health data capture.
- **Tele-psychiatry and IT Improvements:** Strengthen tele-psychiatry, improve internet and intranet systems at headquarters and facilities, and enhance social media presence.
- **Land Acquisition and Infrastructure:** Continue steps for compulsory land acquisition fronting the hospital and complete the fence wall construction around the hospital.

HEALTH FINANCING

- Conduct quarterly financial audit visit (MHA& Hospitals)

9.3 ACKNOWLEDGEMENT

The Mental Health Authority extends its heartfelt gratitude to the following organizations and individuals for their unwavering support and collaboration:

13. **Honourable Minister for Health** for dedication to advancing mental health initiatives.
14. **Ministry of Health** for continued partnership and commitment to mental health advocacy.
15. **World Health Organization (WHO)** for valuable contributions to global mental health initiatives.
16. **Foreign Commonwealth Development Office (FCDO)** for supporting our activities.
17. **Ghana Health Services (GHS)** for promoting mental health services.
18. **Christian Health Association of Ghana (CHAG)** for collaboration in enhancing mental health care.
19. **Ghana Somubi Dwumadie (GSD)** for impactful work in mental health.
20. **Civil Society Organizations (CSOs)** for advocacy and support in raising awareness about mental health issues.
21. **All individuals and entities** who have continuously supported our mission to improve mental health services in Ghana.



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GA-110-3586