

## Case study: Mental illness

### Name of the Portfolio > Health (Mental Health)

#### The Problem

Mr. Ramsingh [name has been changed], a 25-year-old male from Davanpur, soon after getting married, started aggressive behavior towards everyone who came around. His family sought help and treatment from multiple local physicians and traditional faith healers (TFH); however, there was no improvement in his behavior. Subsequently, in the year 2012, they brought him to JSS Ganiyari Hospital, where he was diagnosed with schizophrenia. For a brief period, he took treatment; and everyone noticed improvement in his behavior. Further, due to the improved situation, the family neglected his mental health issue, and subsequently he stopped taking antipsychotic medications that were prescribed to him. However, few months later his episodes of aggressive behavior resumed, and he would threaten anyone who would come near him. He had isolated himself and would cook for himself and would physically abuse his wife daily.

At the community, while attempting to get him back to treatment, a JSS senior health worker (SHW), Mr. Doman, attempted to visit his home and encourage him to start the treatment. However, Mr. Ramsingh attempted to attack Mr. Doman with a sharp sickle. He threatened and chased Mr. Doman for nearly two hours. Threatened by this incident, nobody, including JSS staff, would dare to visit Mr. Ramsingh's home. 6-7 months ago, Ms. Janki, an SHW from the Shivtarai cluster and cluster coordinator, was going for a peer support group meeting in Davanpur village and saw Ramsingh sitting on a stone platform in their path to the meeting venue. While passing nearby Mr. Ramsingh, both experienced threatening remarks [ref. beneficiary quotes] from Ramsingh.

#### The intervention

Following the above-mentioned incident, Ms. Janki, with the help of VHW Ms. Bhagvati *Didi*, strategically started the dosage of antipsychotic medications by mixing them with food that Mr. Ramsingh would take from Ms. Bhagvati. For the same, they used a good rapport Ms. Bhagvati had with Mr. Ramsingh, where infrequently Mr. Ramsingh would seek food (cooked curry, in case he had nothing to eat at his home) and, if needed, medicines (tablets) for general health issues. Considering the only available opportunity to initiate treatment, Ms. Bhagvati, under the guidance of Ms. Janki and without the knowledge of Mr. Ramsingh, started mixing the antipsychotic medicines (that were prescribed to him by JSS Ganiyari hospital) in his food. This resulted in improvement in his behavior, which further convinced him to start treatment. Further, despite regret (as previously he had threatened her), Ramsingh met Ms. Janki and sought treatment for generalized malaise, where she happily provided him counseling [ref. quotes] and encouraged him to continue the antipsychotic treatment, which Mr. Ramsingh continued until the day.

This case demonstrates the effectiveness of community-based interventions (CBI) that helped in resuming treatment by the patient for a major psychiatric disorder. For the same under the village health project, the individuals from the same community (such as SHWs and VHWs) have been trained to identify prevalent mental health issues in the community, provide an empathetic approach, and provide community-based care (counseling) to individuals experiencing mental health issues.

And after few days later, Ms. Janki visited Ramsingh's house and inquired about his health. He replied with great contentment that the medicine is very effective [ref. quotes]. Now he has sound sleep and doesn't experience body pain. Further, in subsequent visits, VHW Bhagvati also visited him and reported to Ms. Janki that now Ramsingh works and earns well for his family. All the episodes of aggressive behavior have subsided.

## Beneficiary quotes

*“If you are in such great trouble, go to Janki Didi when she comes next! She will definitely help you!”* [Confused], Ramsingh asked, *“Who is Janki Didi?”*

Bhagvati replied, *“The same Didi who asks about your well-being every time when she is in the village!”*.

Ramsingh [beneficiary] and Ms. Bhagvati [VHW]

*“Sure, Ramsingh, I treat everyone in the village; why will I not give medicine to you! Take this [handing over the tablets to him], and it will reduce your body pain slowly and also help you sleep better.”*

Ms. Janki [SHW]

### Post improvement discussion:

*Didi, the medicine that you gave me is very effective. Now, I can sleep well, and there is no body pain at all.*

Ramsingh [beneficiary, to SHW Ms. Janki]

## Key success factors

This success story highlights the importance of –

1. Capacity building of individuals within the community to motivate them to assess the health needs (including mental health) of their community and providing specific interventions in mitigating the health/mental health issues.
2. Committed efforts by the well-trained and committed community health workers (SHW, VHW) in reducing the burden of chronic illnesses and mental health issues in rural, remote areas of Chhattisgarh.

## Infographic

None

## Goal Impact

This success story corresponds to Goal 3—Good Health and Well-being. Where the timely intervention by the community-based, well-trained cadre of SHW and VHW helped to improve the mental health and overall well-being of the target population.