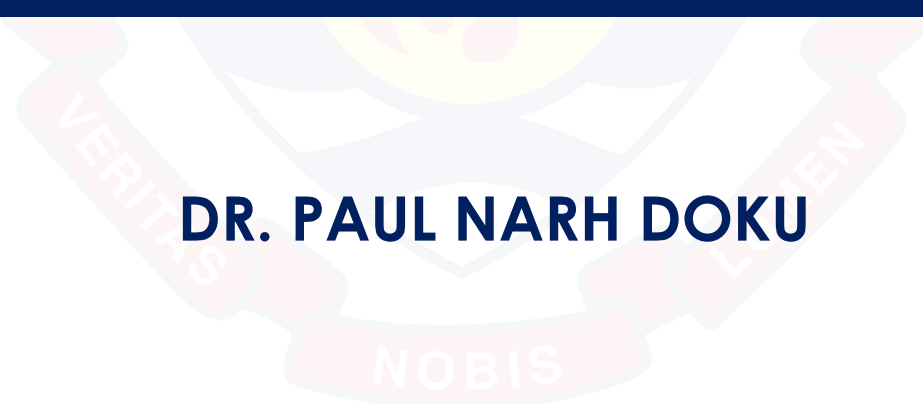




CONTEMPORARY MENTAL HEALTH NURSE IN GLOBAL NURSING

DR. PAUL NARH DOKU





OUTLINE



- I. Global Mental Health: The Challenges
- II. The Role of Contemporary Mental Health Nurses in Global Nursing
- III. Key Competencies and Skills for Contemporary Mental Health Nurses
- IV. Promoting Global Mental Health: Strategies and Best Practices

I) Global Mental Health: The Challenges



- A. *Prevalence and Burden of Mental Illness (MI)*
- B. *Mental Health Disparities Across Regions*
- C. *Emerging Trends – Changing Faces of MI*

A) Prevalence and Burden of Mental Illness



Prevalence of Mental Illness



■ Depressive disorders

■ Anxiety disorders

■ Schizophrenia

■ Other mental disorders

■ Autism spectrum disorders

■ Bipolar disorder

■ Conduct disorder

■ Idiopathic developmental intellectual disability

■ Eating disorders

■ Attention-deficit/hyperactivity disorder

Males

Females

95+ years

90-94 years

85-89 years

80-84 years

75-79 years

70-74 years

65-69 years

60-64 years

55-59 years

50-54 years

45-49 years

40-44 years

35-39 years

30-34 years

25-29 years

20-24 years

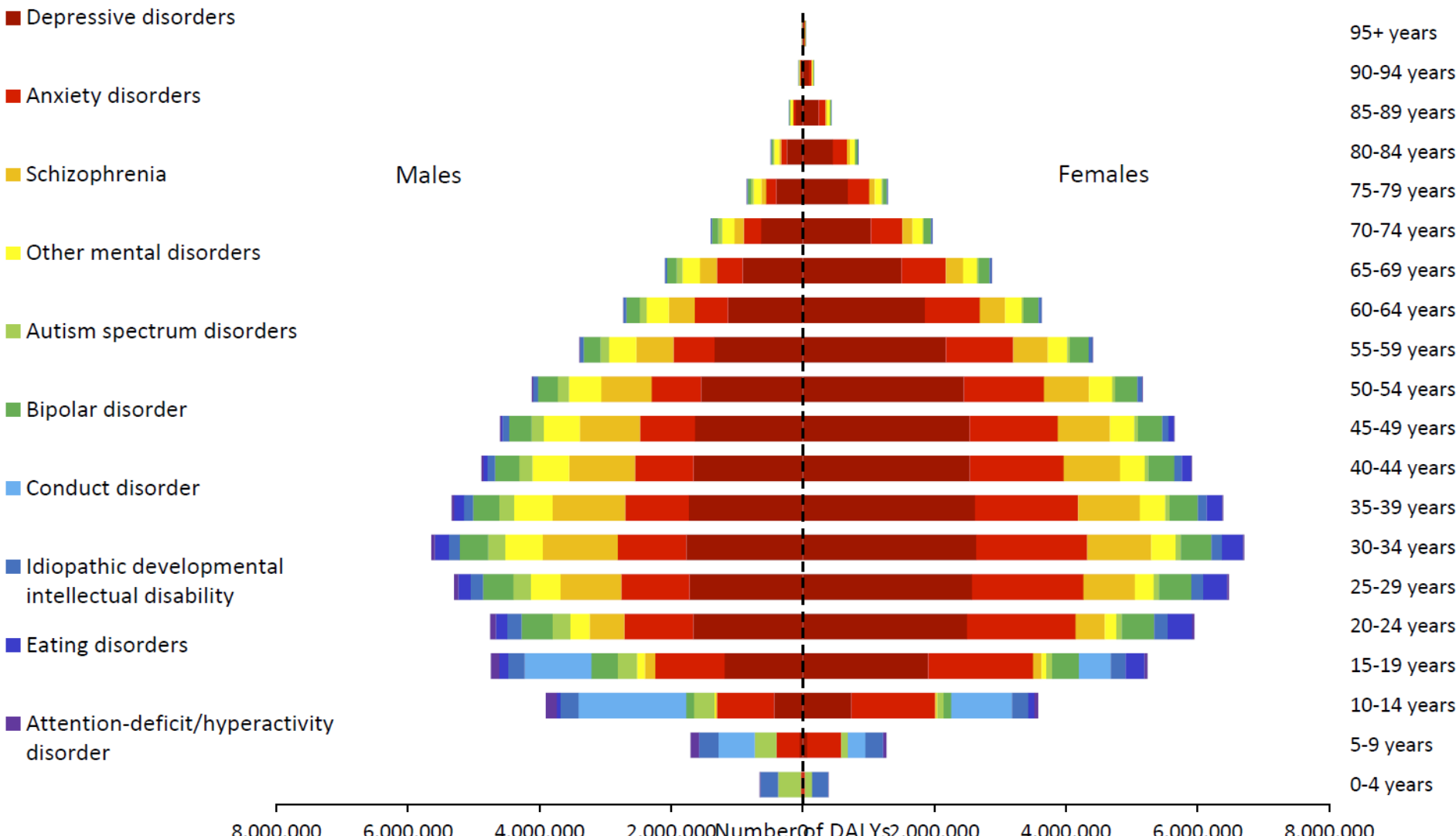
15-19 years

10-14 years

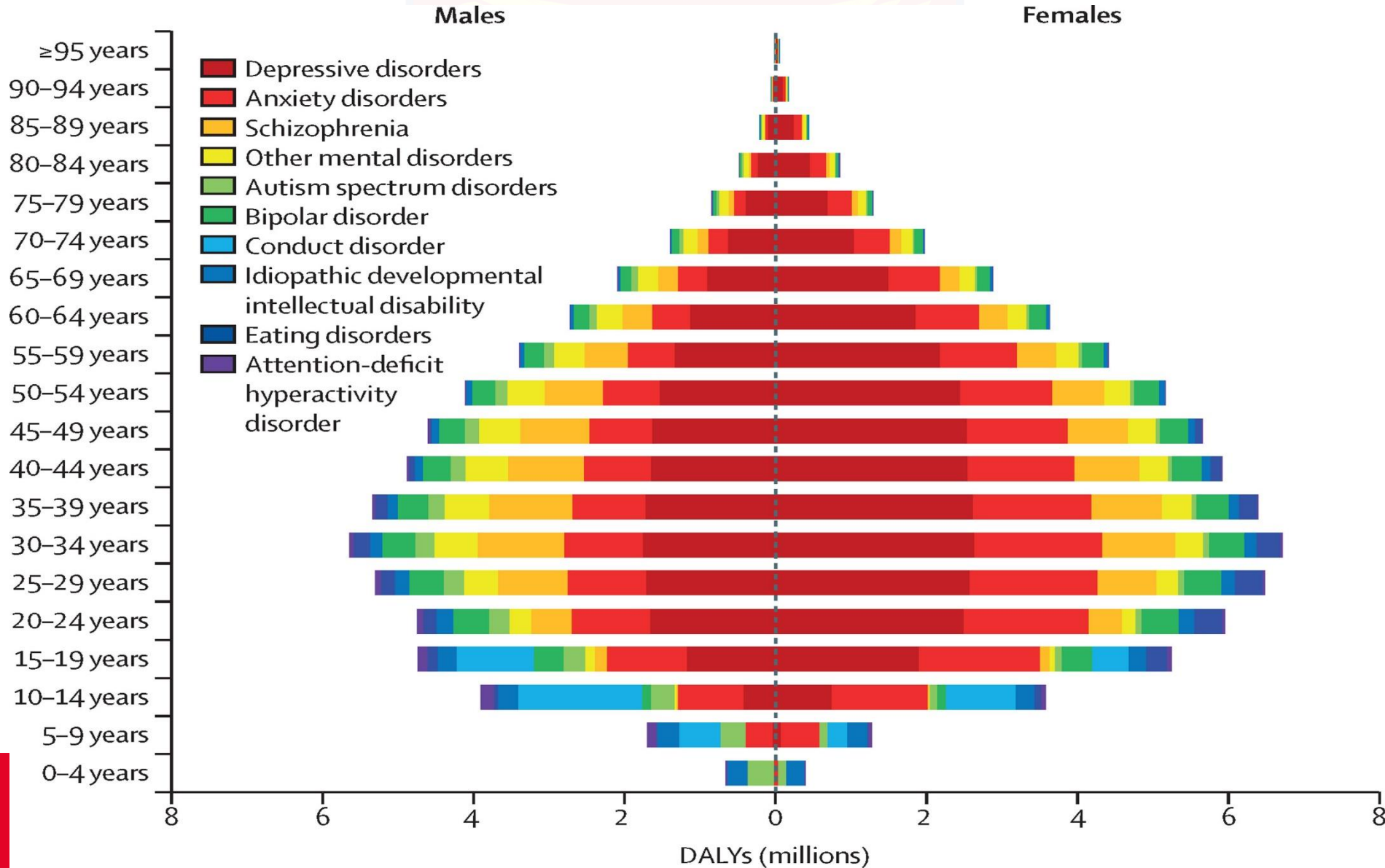
5-9 years

0-4 years

8,000,000 6,000,000 4,000,000 2,000,000 Number of DALYs 2,000,000 4,000,000 6,000,000 8,000,000



Burden of Mental Illness



B) Mental Health Disparities Across Regions

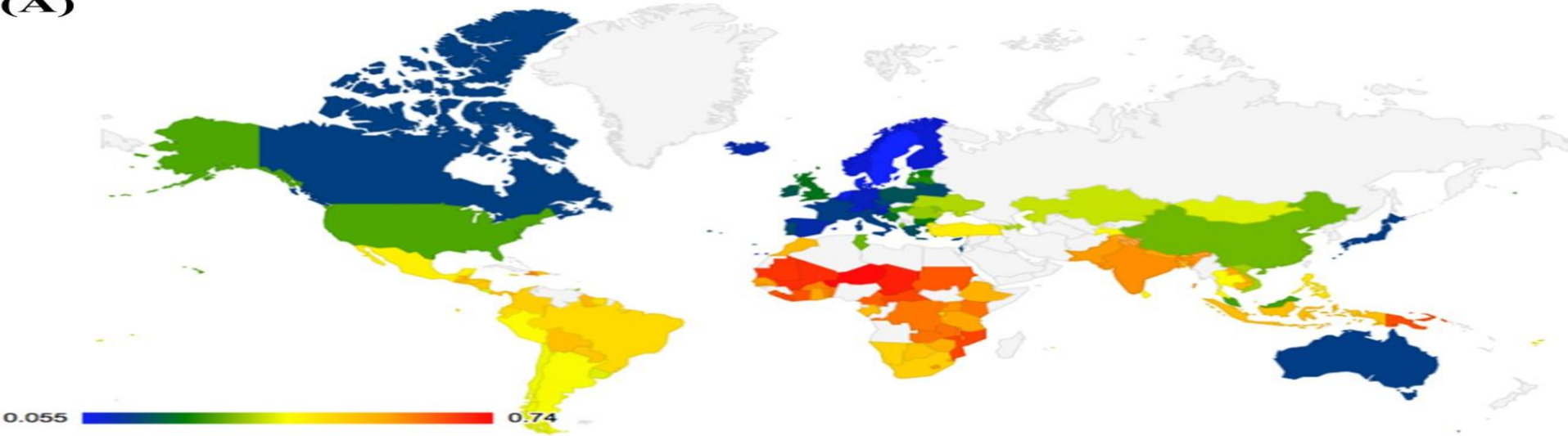


- Marginalized populations (refugees, migrants, indigenous communities, etc) have higher rates of mental health issues
- L/MICs often bear the significant burden

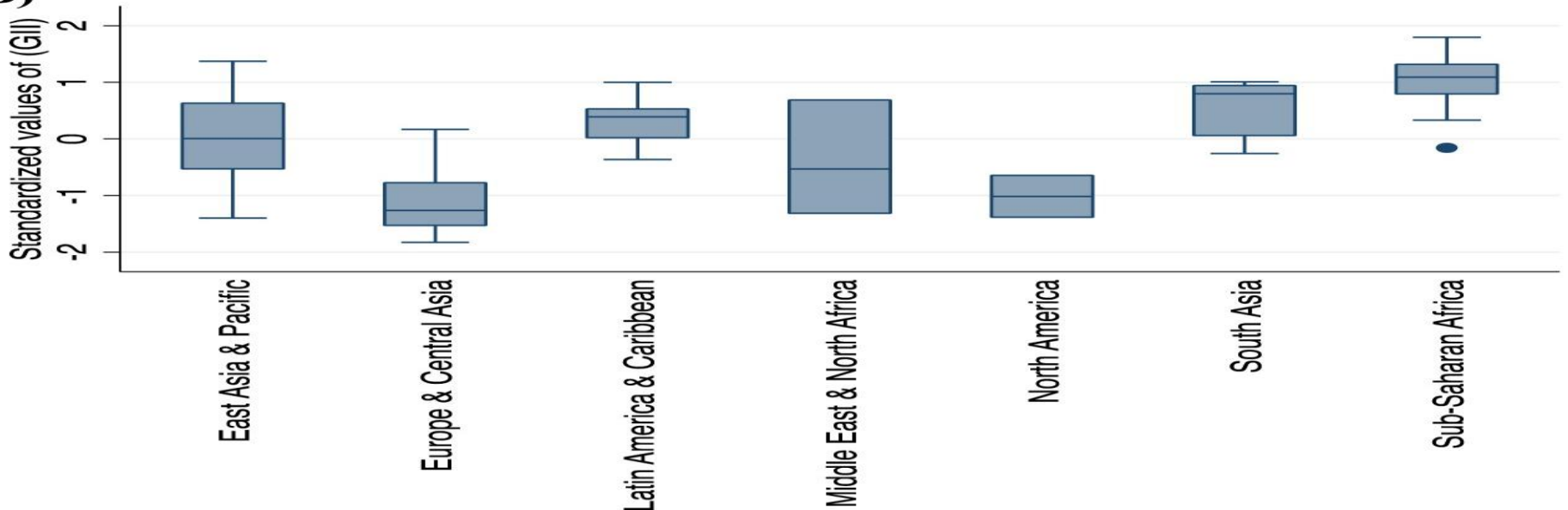
Regional Disparities



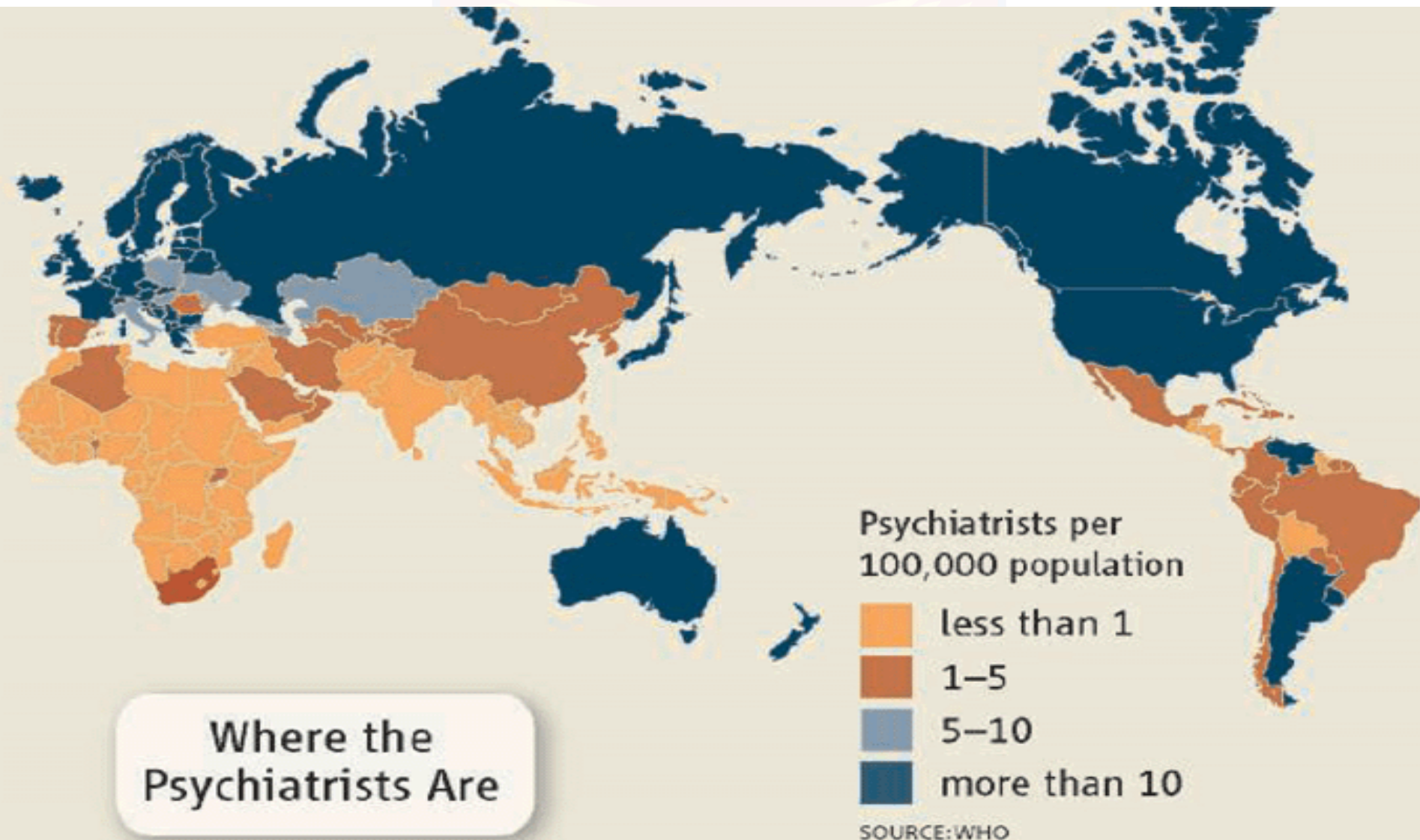
(A)



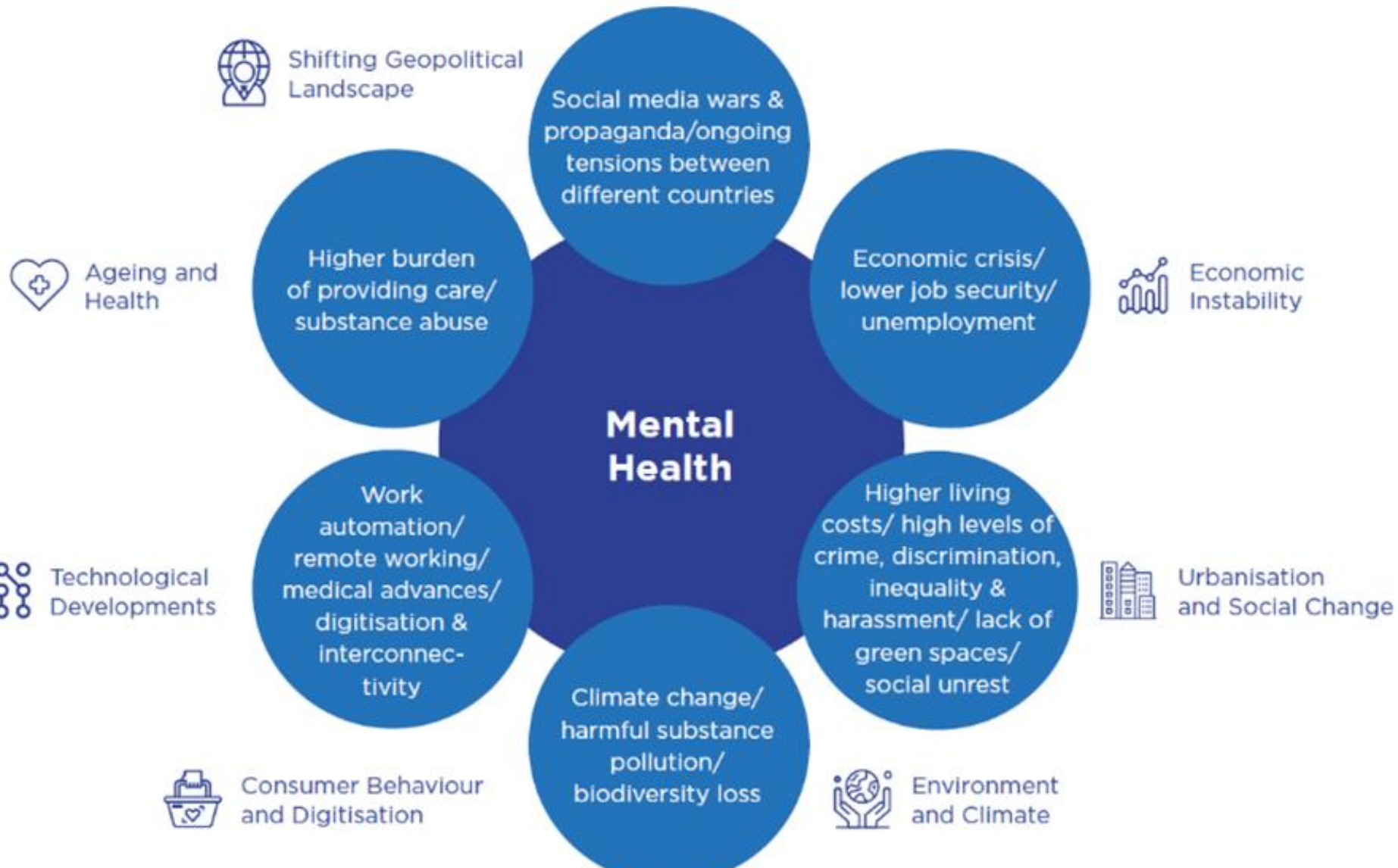
(B)



Access to Mental Health Services



C. Emerging Trends – Changing Faces of MI



THE ROLE OF CONTEMPORARY MENTAL HEALTH NURSES IN GLOBAL NURSING



MOVE
FOR
MENTAL
HEALTH



LET'S INVEST
#MoveForMentalHealth



World Health
Organization



II). THE ROLE OF CONTEMPORARY MENTAL HEALTH NURSES IN GLOBAL NURSING

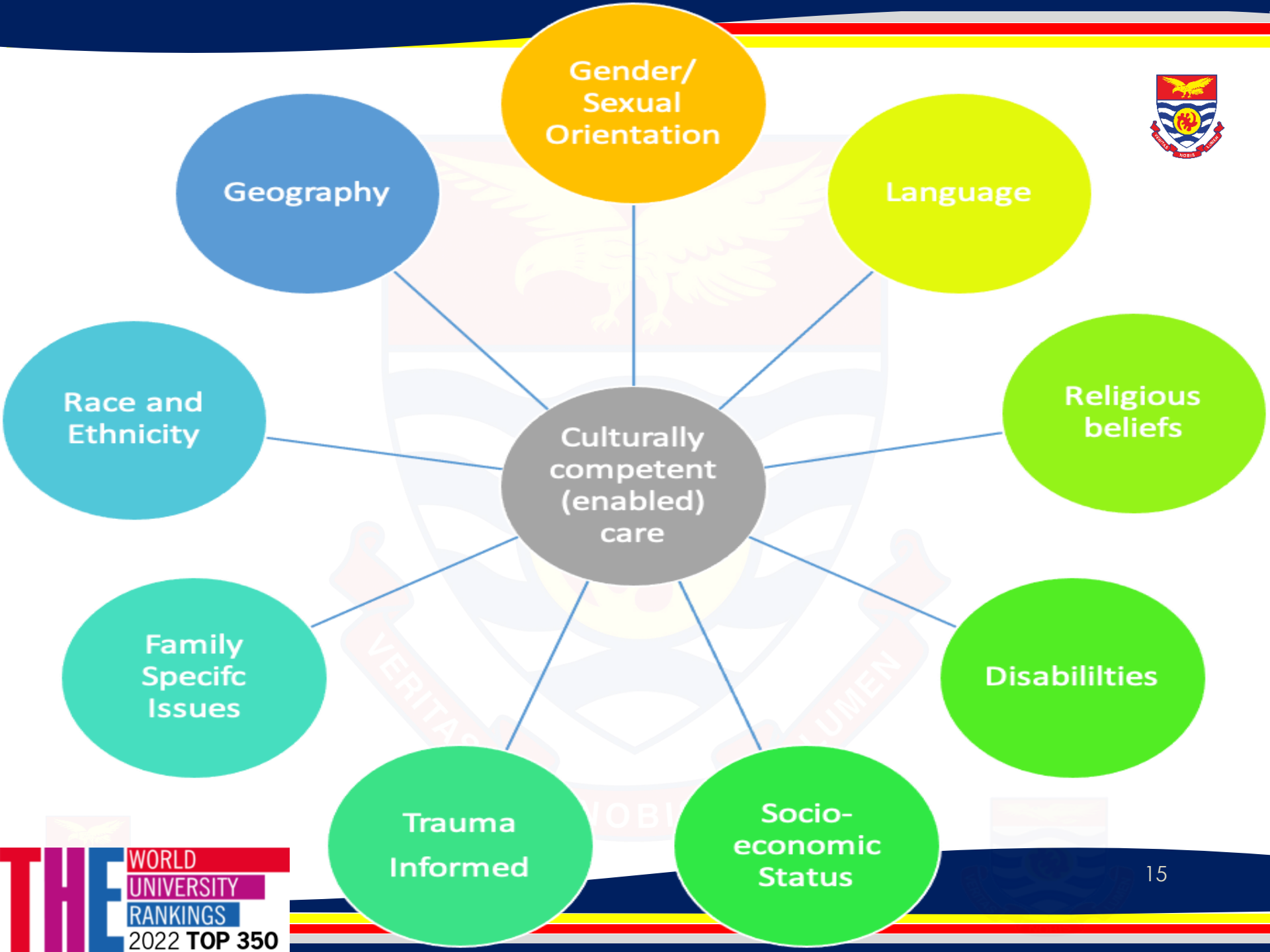


- A. Providing Culturally Competent Care*
- B. Collaboration and Multidisciplinary Approaches*
- C. Bridging the Mental Health Treatment Gap*
- D. Disaster Response and Trauma Care*
- E. Empowering Individuals and Communities*
- F. Advocacy and Policy Development*



A. Providing Culturally Competent Care





Gender/
Sexual
Orientation

Language

Religious
beliefs

Disabilities

Socio-
economic
Status

Trauma
Informed

Family
Specific
Issues

Race and
Ethnicity

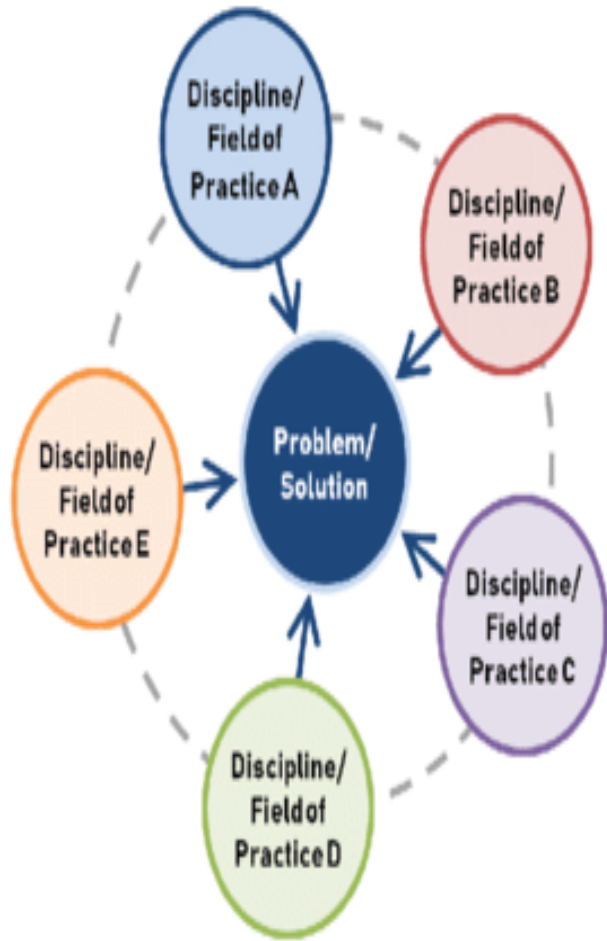
Geography

Culturally
competent
(enabled)
care

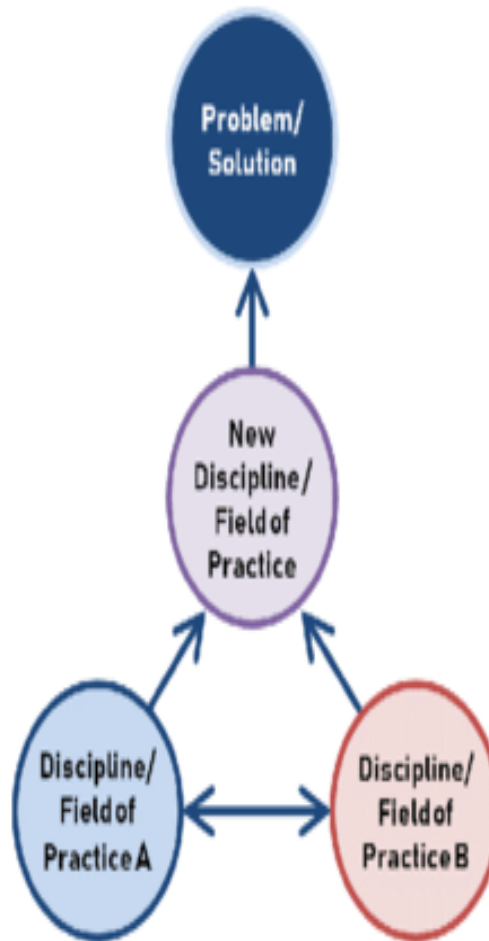
B. Collaboration and Multidisciplinary Approaches



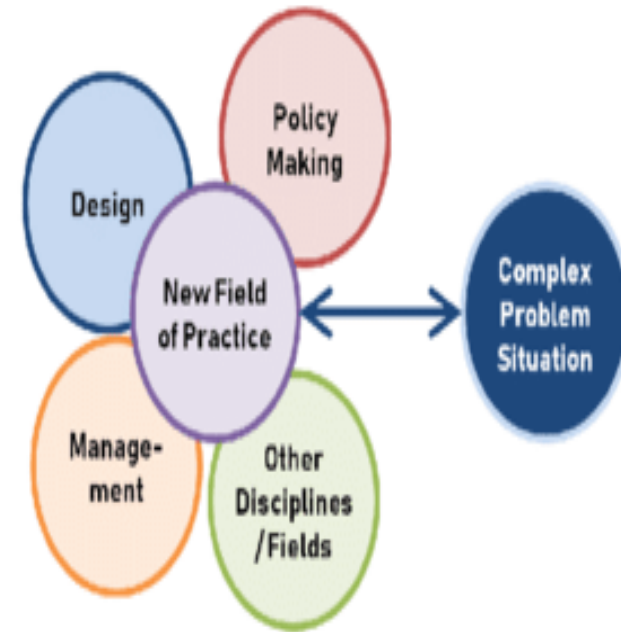




Multidisciplinarity



Interdisciplinarity



Transdisciplinarity

C. Bridging the Mental Health Treatment Gap



MENTAL HEALTH CARE GAP



CARE PROVIDER SHORTFALL



AN OUTDATED APPROACH



INADEQUATE SERVICE DELIVERY



STIGMA & SILENCE



DISCRIMINATION & MARGINALIZATION



UNAFFORDABLE HEALTH CARE

**Condition****Proportion of people untreated, %**

Schizophrenia

32.2

Depression

56.3

Dysthymia

56.0

Bipolar disorder

50.2

Panic disorder

55.9

Generalised anxiety disorder

57.5

Obsessive–compulsive disorder

57.3

Alcohol misuse or dependence

78.1



Bridging The Gap



Mental
Health
Illness

Mental
Health
Services

**LOOK
AGAIN**
MENTAL ILLNESS RE-EXAMINED

presented by
the BC Schizophrenia Society

Bridging Mental Illness & Substance Use Services



D. Disaster Response and Trauma Care



Emergency Medicine

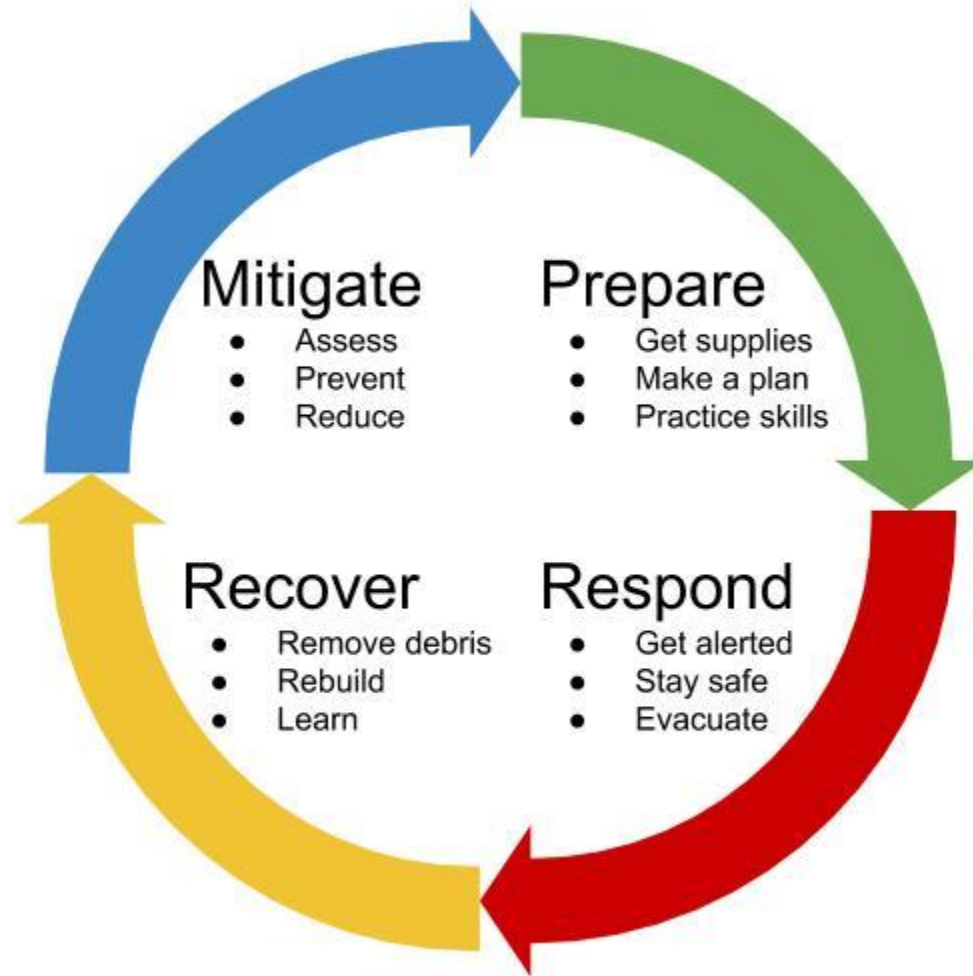


Emergency and Trauma Services
Level I Trauma Center

Disaster Preparedness and
Emergency Response



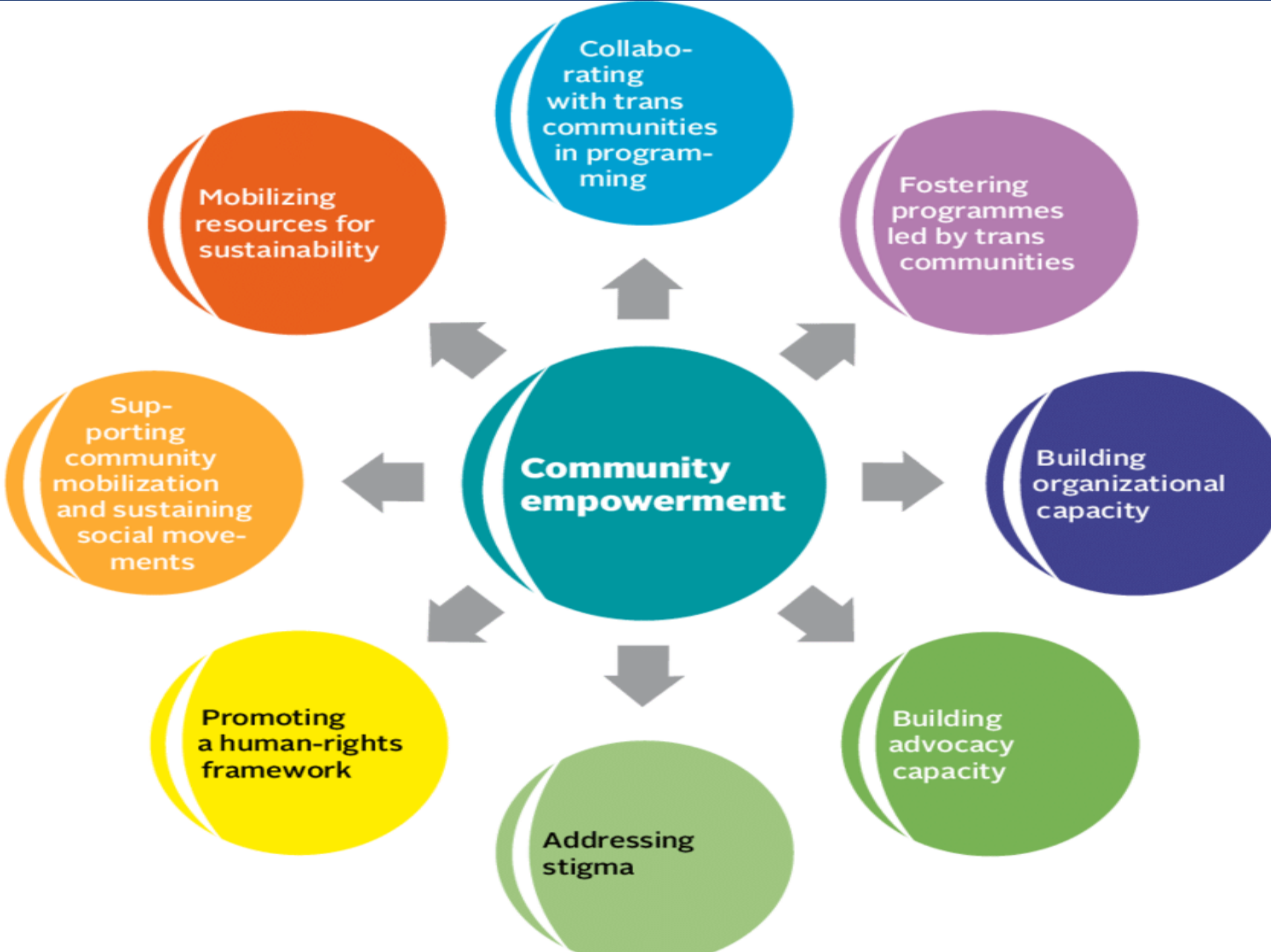






E. Empowering Individuals and Communities







NOBIS



Level of analysis	Process ('empowering')	Outcome ('empowered')
Individual	Learning decision-making skills	Sense of control
	Managing resources	Critical awareness
	Working with others	Participatory behavior
Organizational	Opportunities to participate in decision-making	Effectively compete for resources
	Shared responsibilities	Networking with other organizations
	Shared leadership	Policy influence
Community	Access to resources	Organization coalitions
	Open government structure	Pluralistic leadership
	Tolerance for diversity	Residents' participatory skills

F. Advocacy and Policy Development



III. Key Competencies and Skills for Contemporary Mental Health Nurses



- A. *Cultural Competence and Sensitivity*
- B. *Collaborative Practice and Interprofessional Education*
- C. *Evidence-Based Practice and Research*
- D. *Leadership and Advocacy*
- E. *Continuous Professional Development*

A. Cultural Competence and Sensitivity



Culture & Cultural Competency





CULTURAL COMPETENCE IMPORTANCE



© Study.com



Five Elements of Cultural Competence

INDIVIDUAL LEVEL

1

acknowledge cultural differences

2

understand your own culture

3

engage in self-assessment

4

acquire cultural knowledge & skills

5

view behavior within a
cultural context

B. Collaborative Practice and Interprofessional Education





Collaborative Practice and Interprofessional Education



Interprofessional Collaboration

Cultural Engagement

Values and Ethics

Roles and Responsibilities

Interprofessional Communication

Teams and Teamwork

Benefits of Collaborative Practice and Interprofessional Education



C. Evidence-Based Practice and Research



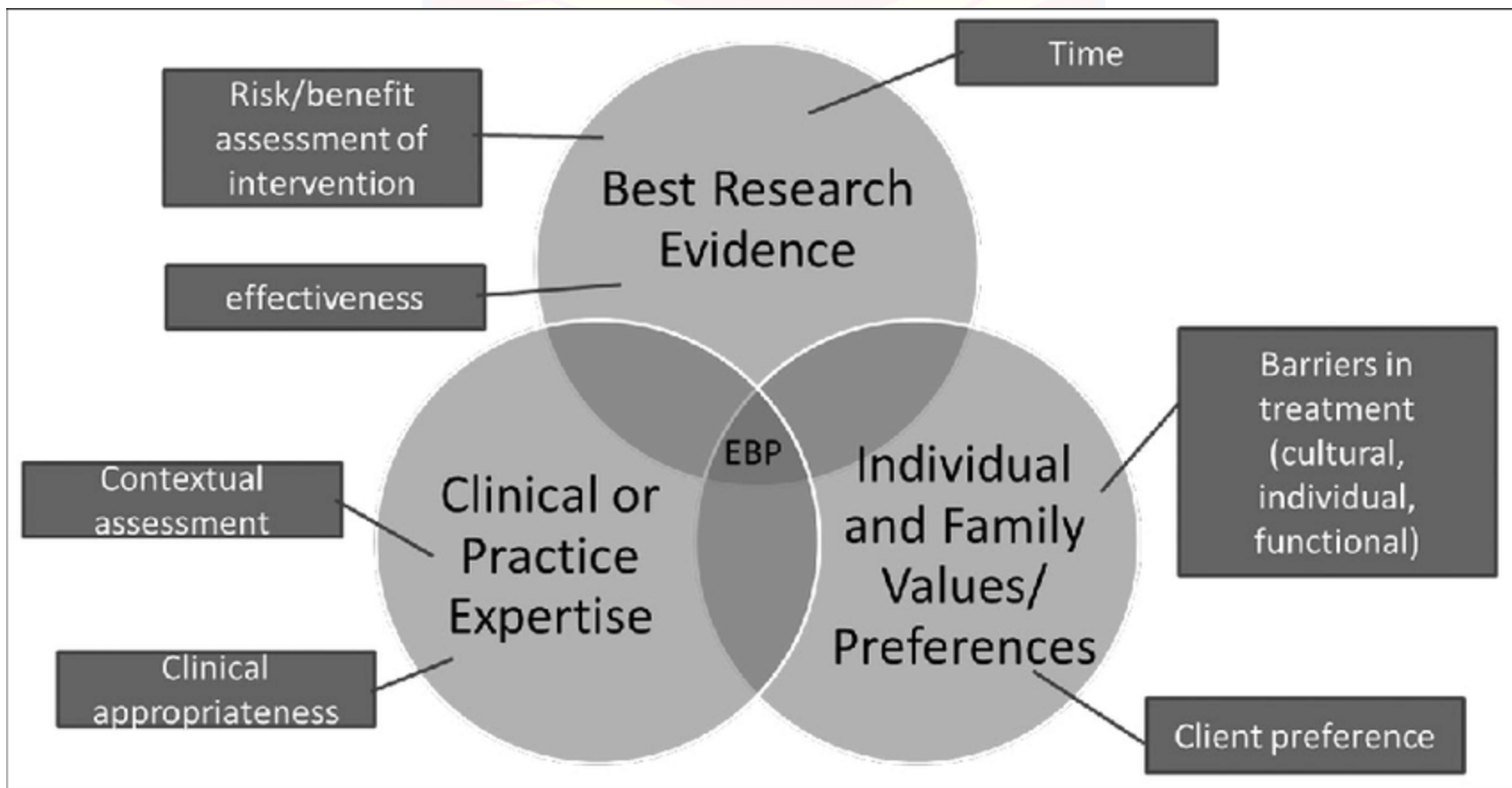


Clinical Expertise

Best Research Evidence

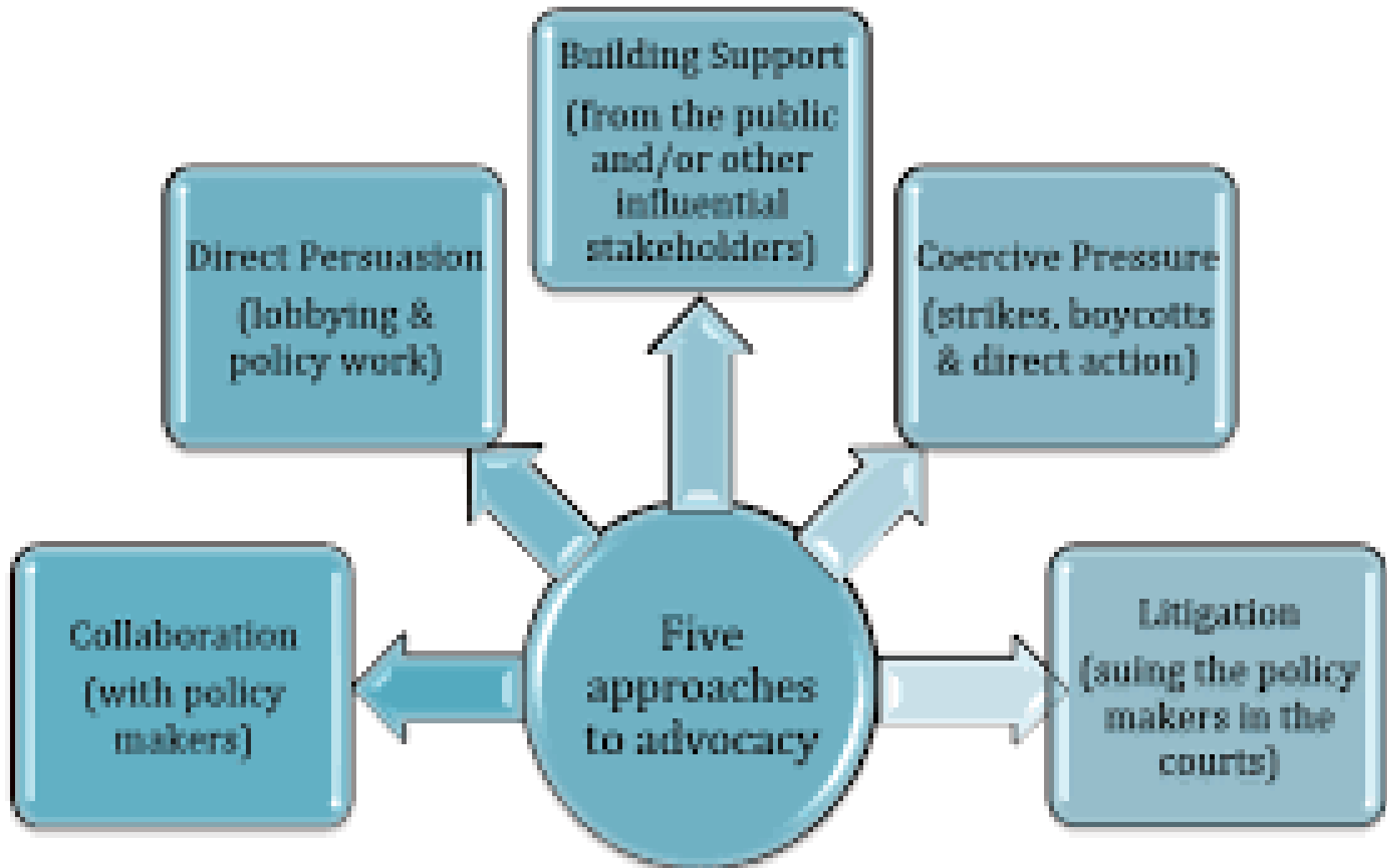
Patient Values

Evidence-Based Practice



NOBIS

D. Leadership and Advocacy



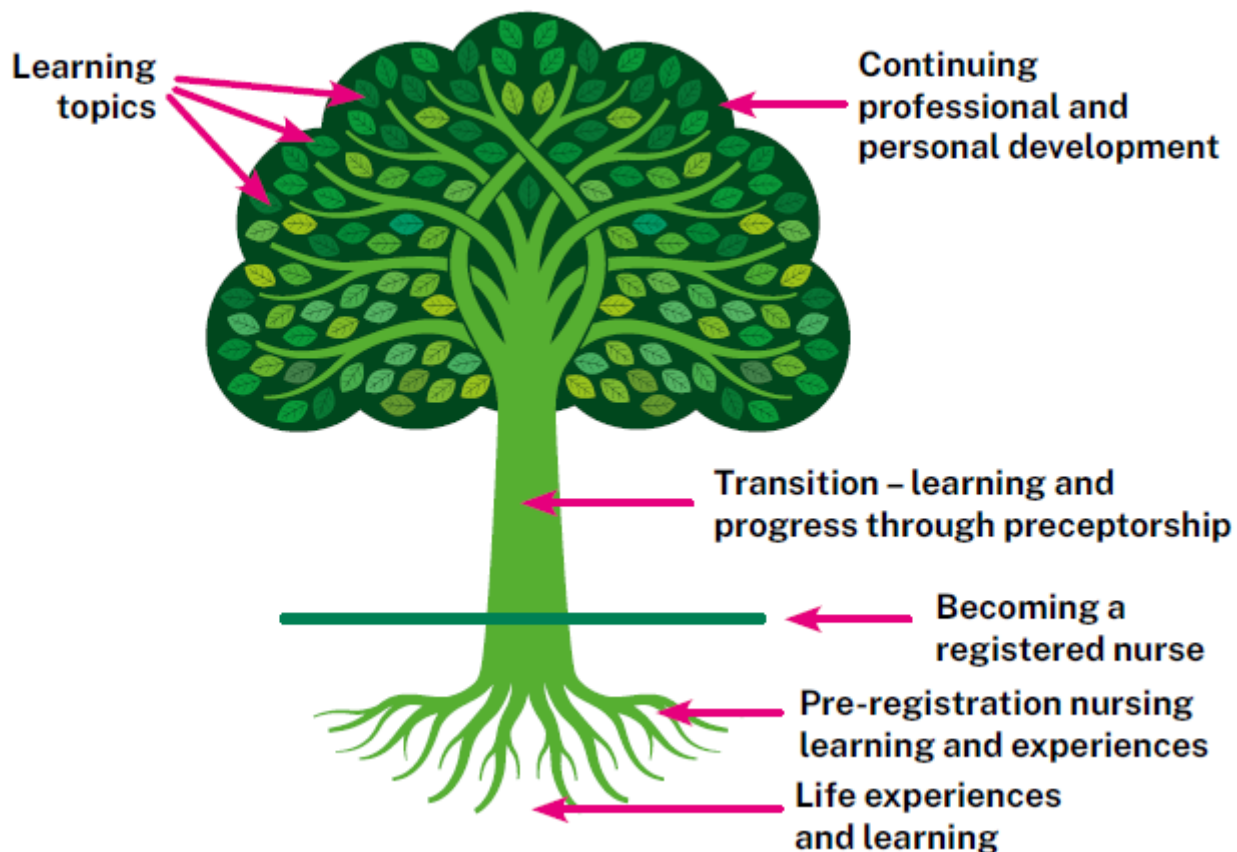
E. Continuous Professional Development



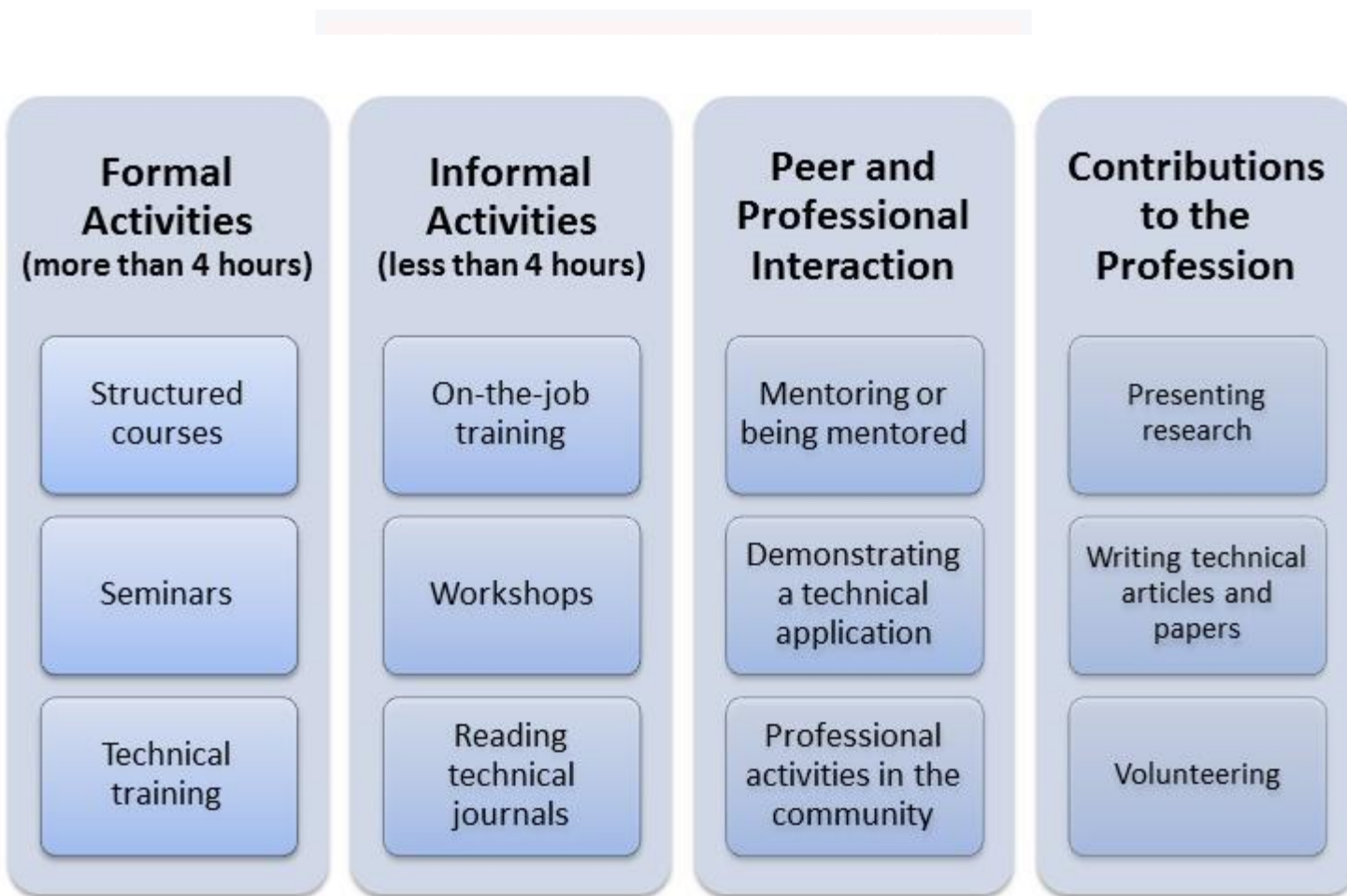




The tree of learning and personal development



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NOBIS

IV. Promoting Global Mental Health: Strategies and Best Practices



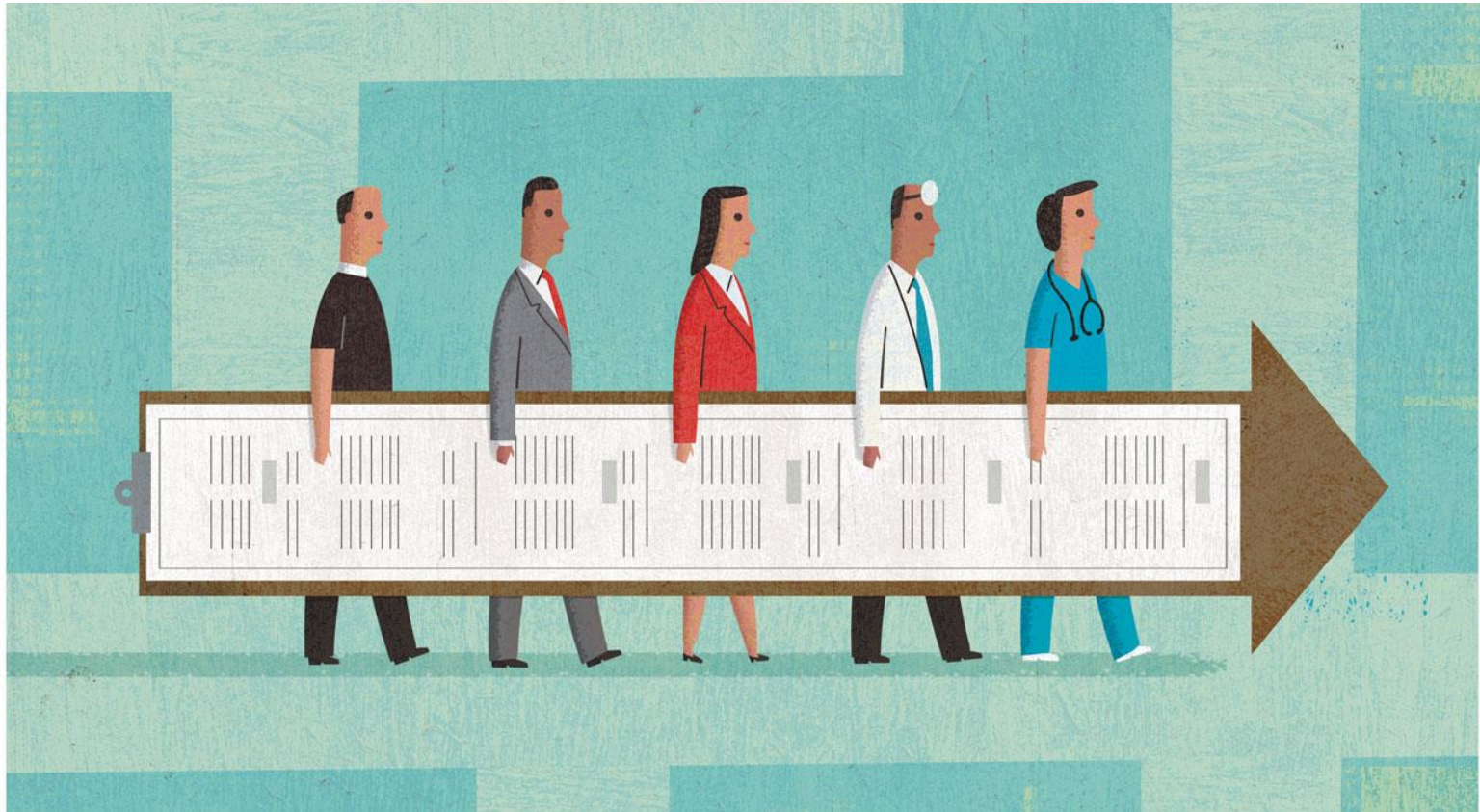
- A. *Strengthening Education and Training*
- B. *Enhancing Interdisciplinary Collaboration*
- C. *Integrating Mental Health into Primary Healthcare Systems*
- D. *Addressing Stigma and Promoting Mental Health Literacy*
- E. *Leveraging Technology and Innovation*
- F. *Advocating for Policy Change*

A. Strengthening Education and Training





B. Enhancing Interdisciplinary Collaboration



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INTERDISCIPLINARY

❖ “Breakthrough innovation occurs when we bring down boundaries and encourage disciplines to learn from each other” *Gyan Nagpal*

❖ *Although each discipline contributes unique perspectives, together the team can provide optimal integrated services*



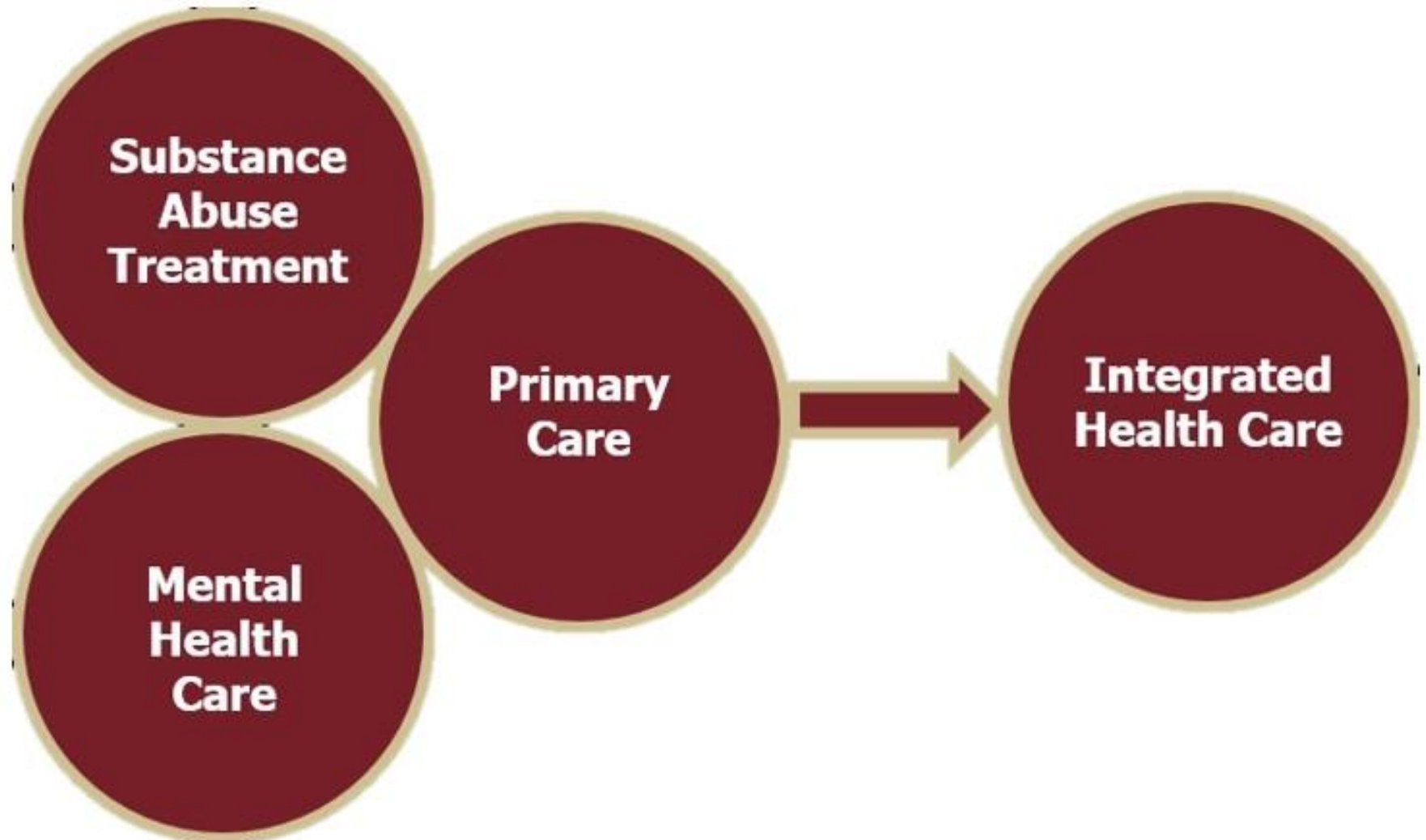
Interprofessional Collaboration



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C. Integrating Mental Health into Primary Healthcare Systems



Why Primary and Behavioral Care Integration is Needed

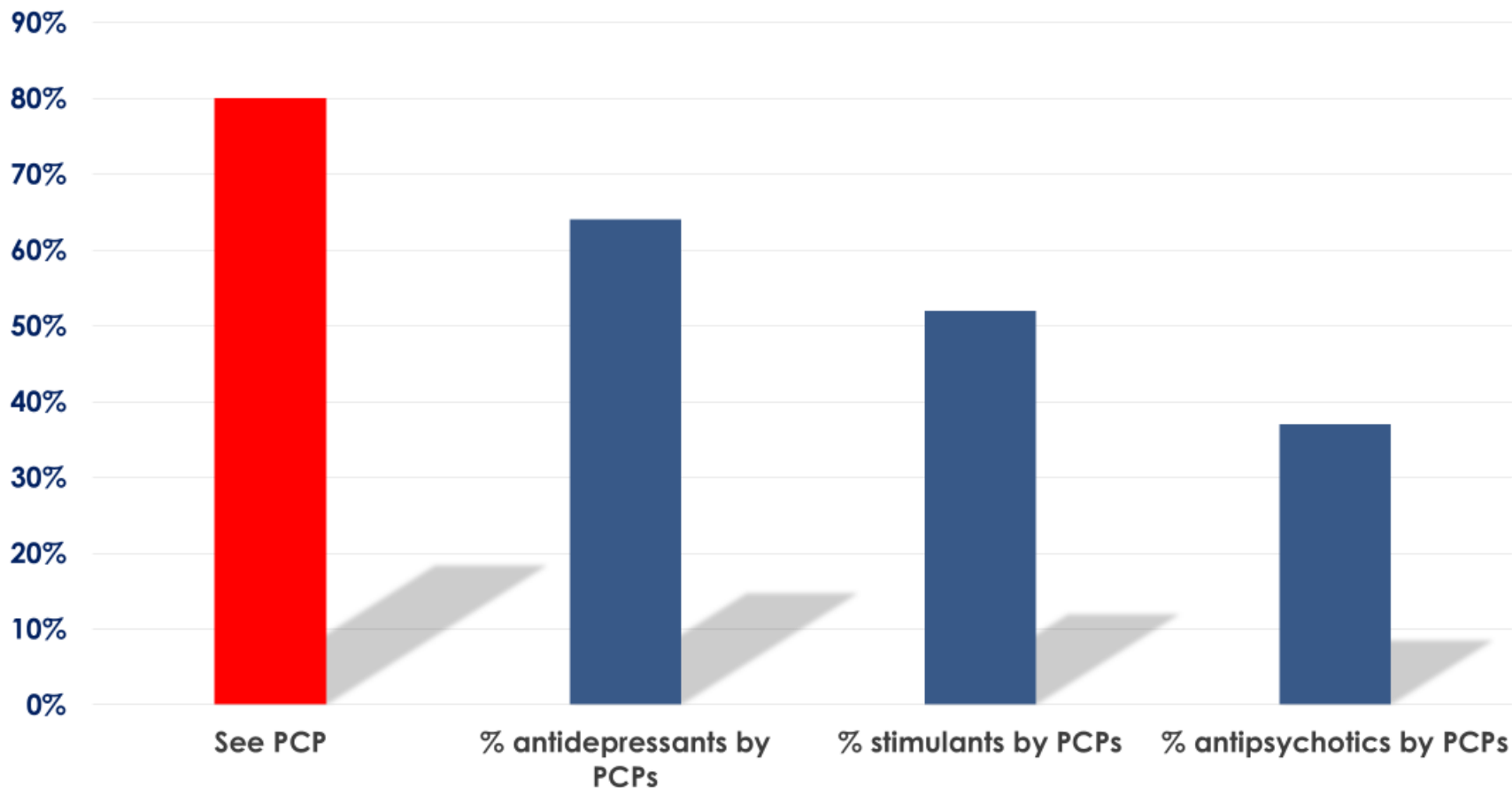
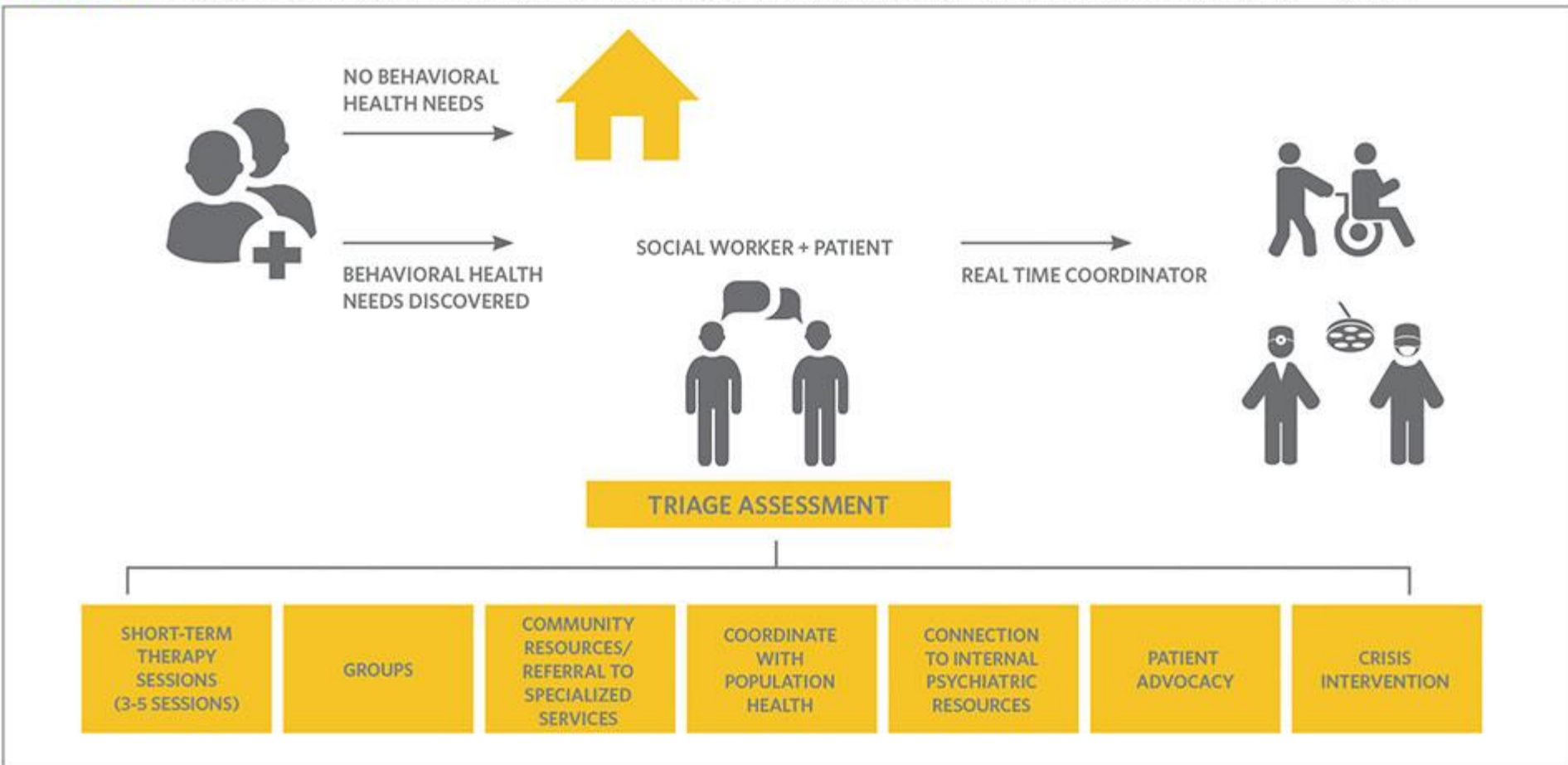




FIGURE 3. PROCESS FLOW FOR INTEGRATED BEHAVIORAL HEALTH AND PRIMARY CARE



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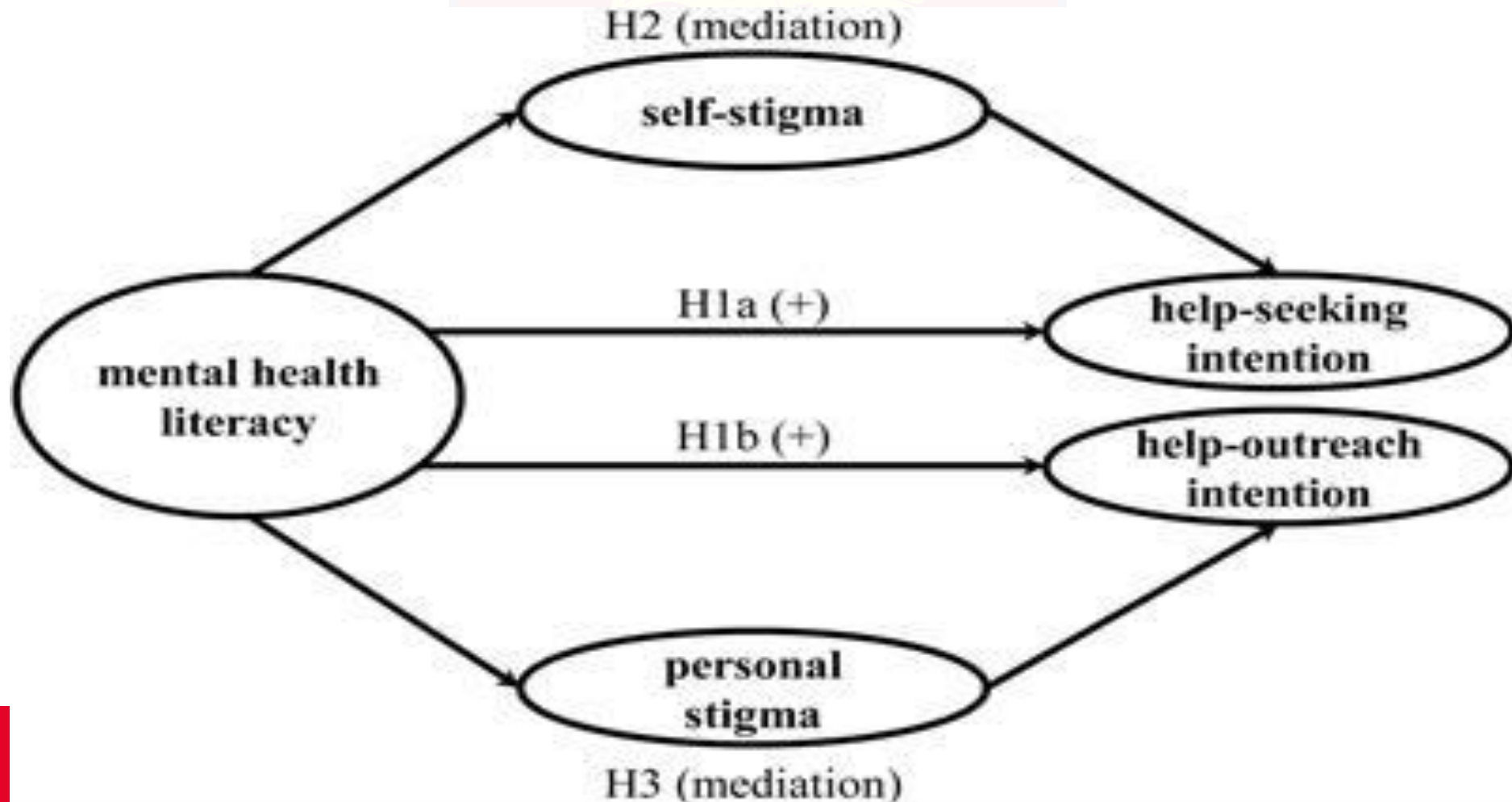
D. Addressing Stigma and Promoting Mental Health Literacy



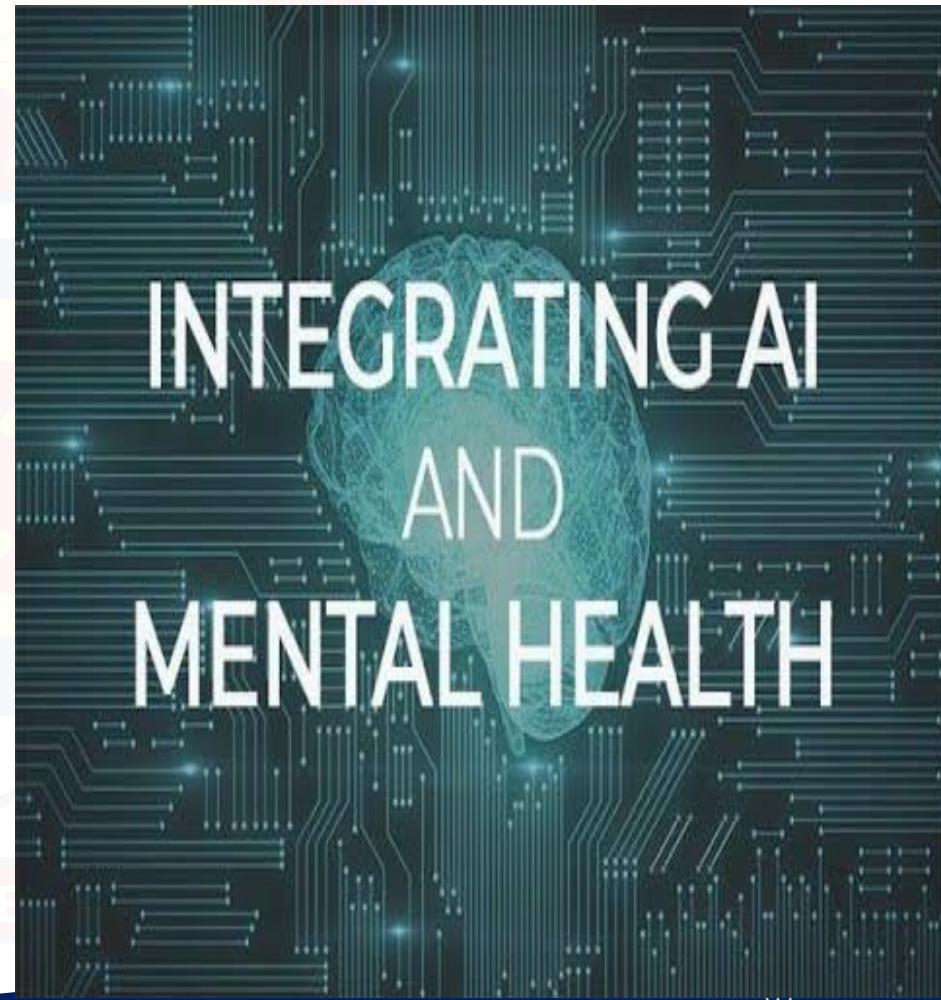
MENTAL HEALTH
STIGMA



Connection Between Mental Health Literacy, Stigma and Promoting Mental Health



E. Leveraging Technology and Innovation





Benefits of AI in the Mental Health Field



**Better,
Personalized Care**



**Shorter
Wait Times**



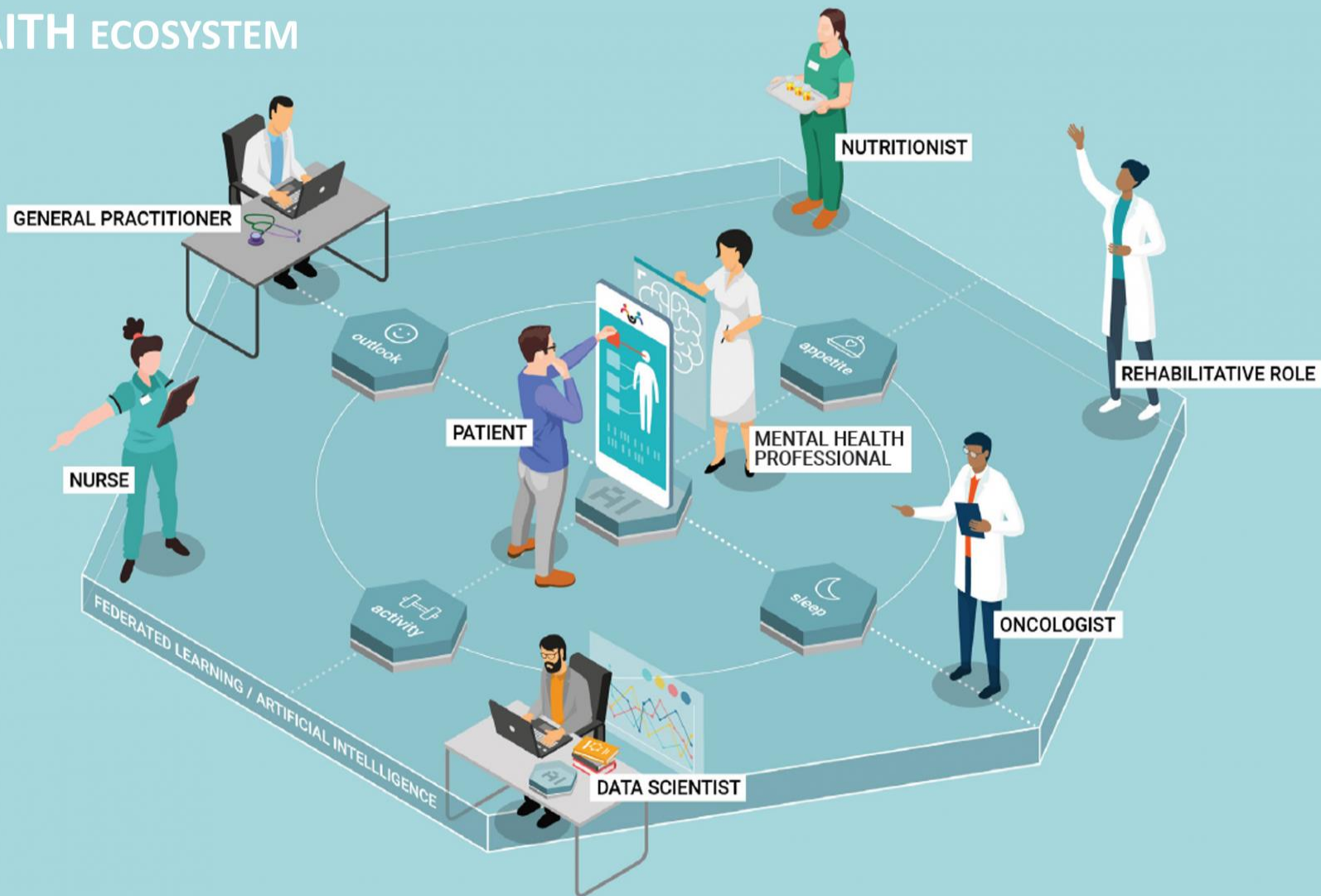
**Remove Barriers
to Treatment**



**Boost
Efficiency**



THE FAITH ECOSYSTEM



F. Advocating for Policy Change



ADVOCATING FOR

POLICY

CHANGE

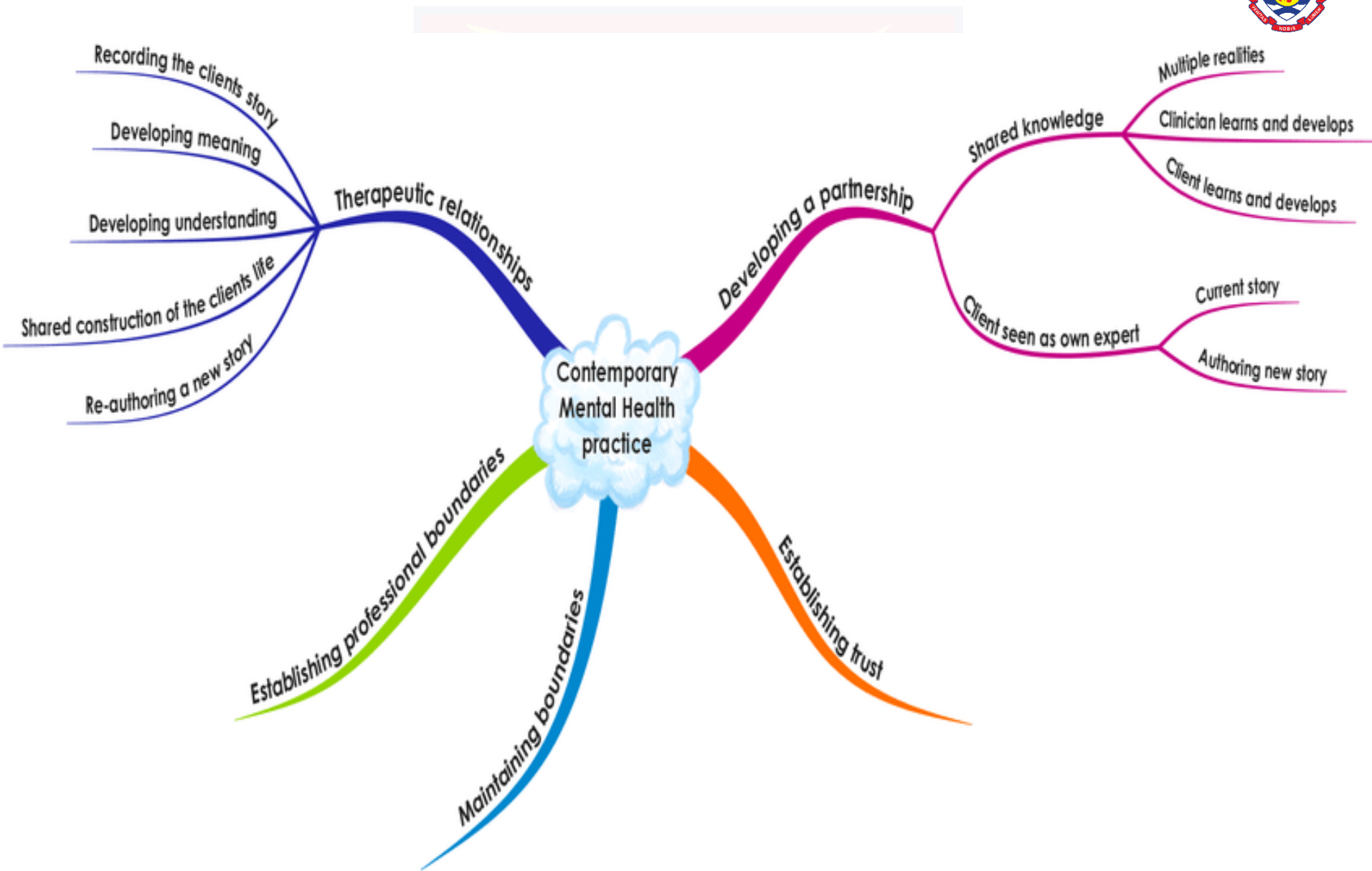




Conclusion







THANK YOU
COMMENTS/QUESTIONS ?

