Project Overview

Effectiveness and Feasibility of a Community-Based Mental Health & Psychosocial Support Services (MHPSS) Pilot Program in Waingmaw Township, Kachin State: An Implementation Research Study

Community Partners International (CPI) is leading an implementation research study in Kachin State, Myanmar to develop and evaluate an evidence-based, culturally adapted, and community-based program for common mental health and psychosocial support (MHPSS) needs that can be delivered by trained lay case workers in remote and conflict-affected settings. The study will contribute to efforts by Myanmar’s Department of Social Welfare (DSW) to create a community-based cadre of MPHSS lay providers to close treatment gaps and address common mental and psychosocial disorders. The study will be conducted in 40 randomly selected villages in Waingmaw township, with an estimated 1,200 individuals participating.

At a Glance

**Donor(s):** UK Department for International Development/UKAID
**Project Duration:** March 2019 - September 2020
**Geographic Coverage:** Kachin State - Waingmaw
**Population Coverage:** c. 1200 in study sample
**Target Population Profile:** Conflict-affected, displaced and underserved communities
**Impact Focus:** Mental health
**Implementing Partner(s):** Myanmar Department of Social Welfare

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Strategy and Activities

This implementation research study is seeking to achieve three principal outcomes.

- Mapping of the availability of existing MHPSS services in Waingmaw Township:
- Development and piloting of a feasible basic package of MHPSS services delivered by lay case workers:
- Generation of preliminary data on the effectiveness of the intervention and “lessons learned” to inform strategies for scaling up community-based MHPSS services in Myanmar.

Using a participatory research approach, the study will recruit a Community Advisory Board (CAB) to provide guidance and input to the project. Preliminary data will be generated on the effectiveness of the MHPSS intervention in terms of depression/anxiety, life satisfaction, perceived levels of social support, distress, and resilience scales.

The project consists of two primary phases: **inception** and **intervention**. During the **inception** phase, CPI and partners will carry out: service mapping; baseline assessments; development of MHPSS training curriculum for non-medical providers; and the recruitment and training of 40 lay case workers and 4 supervisors to provide basic community-based MHPSS services and referrals.

During the **intervention** phase, CPI and partners will provide: training for supervisors on the intervention package and guidelines for supportive supervision; training for lay case workers, featuring didactic and hands-on practice sessions; MHPSS service provision to 40 villages through individual and group counseling sessions (therapy and support group) facilitated by lay case workers; monthly follow-up to clients completing a 12-session counseling series; case reviews: monthly supervision of MHPSS volunteers, with on-the-job training, quality assessments, and individualized feedback based on assessments and patient satisfaction score; identification and referral of severe cases that require a higher level of care; and community awareness raising.

A network of international and national psychiatrists and counselors will review de-identified progress notes as needed to provide quality control, advice, and support for case workers.

The study will directly support adoption by national programs. Data will be used to generate program and policy recommendations to refine and scale up MHPSS interventions in Myanmar.

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