Message from Chairperson

I am a person with lived experience of psychosocial disability. Mr. Matrika Devkota, founding chairperson of KOSHISH has generously provided me continuous guidance and strength during my struggle with mental health problems and then in the recovery. At present, I am contributing back to the community as Chairperson of KOSHISH. I have a firm belief and adherence to 'nothing about us, without us.' It consistently provides me a clear way forward for effective advocacy of rights of persons with mental health conditions and psychosocial disabilities.

Along with being the only self-help organization of persons with lived experiences of mental health conditions and psychosocial disability, KOSHISH is also one of the leading organizations proactively working in the field of mental health and psychosocial wellbeing in Nepal. I feel delighted to see we are growing and widening in our approach, reach and contributions. Our interpersonal and inter-organizational networks are expanding in the country and worldwide. It is supporting us to reach more persons with psychosocial disability with direct mental health and psychosocial services and advocacy efforts of the full enjoyment of rights. The year 2019 endure a very successful year for KOSHISH, and I feel proud of our concerted efforts and remarkable achievements in the year 2019. I would genuinely like to express my gratitude to all who supported KOSHISH directly or indirectly for taking one-step forward in the direction of “Mental Health and Psychosocial Wellbeing for all.”

Shiva Ram Achhami
Chairperson
KOSHISH has been working for the rights of persons with lived experiences of mental health conditions and psychological disability for more than eleven years now. We have been simultaneously advocating for the rights of persons with psychosocial disability and providing direct mental health and psychosocial support services. The echoes of our activities have been heard from Singha Darbar (central government ministries of Nepal) to huts of the community.

We have provided transit care services to abandoned girls, women, boys and men with psychosocial issues from all over the country. Whereas, we have reached to seven districts of Province 3 and Gandaki Province through our community based mental health and psychosocial support services. Finally, both of these programs are supportive of our inclusive approach of advocacy. The dream of our respected founding chairperson Mr. Matrika Devkota has been turning into a reality, which is the outcome of the continuous efforts of our proactive executive board, dedicated employees and esteemed partners/stakeholders.

This year’s Annual Report spotlights some of the close interaction with honorable ministers and judges along with high-level bureaucrats. We would like to thank the honorable minister of Norway Mr. Dag Inge Ulstein for his solidarity in our journey of humanitarianism. While going through this report you will find some stories that provide a glance into the successes of KOSHISH. You will also learn more about KOSHISH’s work through the words and pretty smiles from the communities.

Thanking you all at once again!

Sanjay Raj Neupane
General Secretary
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>CPSW</td>
<td>Community Based Psychosocial Worker</td>
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<tr>
<td>UNCRPD</td>
<td>United Nations Convention on Rights of Persons with Disabilities</td>
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<td>WHO</td>
<td>World Health Organization</td>
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<tr>
<td>CSO</td>
<td>Civil Society Organization</td>
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<tr>
<td>DPO</td>
<td>Disabled People’s Organization</td>
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<tr>
<td>NHRC</td>
<td>National Human Rights Commission</td>
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<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
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<tr>
<td>PSA</td>
<td>Public Service Announcements</td>
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<td>PIL</td>
<td>Public Interest Litigation</td>
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<tr>
<td>UPR</td>
<td>Universal Periodic Report</td>
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<td>GBV</td>
<td>Gender based Violence</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>NPC</td>
<td>National Planning Commission</td>
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<td>CMPH</td>
<td>Community Mental Health Program</td>
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<td>SDG</td>
<td>Sustainable Development Goal</td>
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<tr>
<td>CPSW</td>
<td>Community Psychosocial Worker</td>
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<tr>
<td>ICMH</td>
<td>Inclusive Community Mental Health Program</td>
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<tr>
<td>MHPSS</td>
<td>Mental Health and Psychosocial Support</td>
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<tr>
<td>FCHV</td>
<td>Female Community Health Volunteer</td>
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<tr>
<td>KAP</td>
<td>Knowledge, Attitude and Practices</td>
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<td>Mental Health Gap Action Program</td>
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<tr>
<td>OPD</td>
<td>Out Patient Department</td>
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<tr>
<td>WSPD</td>
<td>World Suicide Prevention Day</td>
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<td>CBO</td>
<td>Community Based Organizations</td>
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<tr>
<td>CBR</td>
<td>Community Based Rehabilitation</td>
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<tr>
<td>ANM</td>
<td>Auxiliary Nurse Midwives</td>
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<tr>
<td>SHG</td>
<td>Self Help Groups</td>
</tr>
<tr>
<td>PRA</td>
<td>Participatory Rural Appraisal</td>
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<tr>
<td>RSDC</td>
<td>Rural Self-reliance Development Centre</td>
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Brief History

Mental health and psychosocial wellbeing are still new paradigms in Nepal. Historically, there has been less focus on mental health services and rights of persons with mental health and psychosocial disability. By the end of the 20th century, persons with lived experiences of disabilities started to raise their strong voices in Nepal through a self-advocacy movement. Along came a few key initiations in the field of mental health and psychosocial wellbeing.

In 2008, KOSHISH became the first organization led by persons with lived experiences of psychosocial disability. KOSHISH has strong coherence with “Nothing about us, without us.” Hence, KOSHISH began to respond to the issues by creating a platform for persons with lived experiences and professionals to come together and work for promoting rights of persons with or at risk of psychosocial disabilities.

Nothing about us, without us!
KOSHISH is a nongovernmental organization. As a national self-help organization, KOSHISH works in the field of mental health and psychosocial wellbeing in Nepal. The word “KOSHISH” means “making an effort.” KOSHISH is affiliated with Social Welfare Council under the Ministry of Women, Children and Social Welfare (Affiliation No. 25676) and registered in District Administration Office, Kathmandu (Registration No. 086/065) in 2008. Since 2008, advocacy for inclusion and dignity of persons with or at risk of mental health conditions and psychosocial disability has been at the forefront of KOSHISH’s goals.

KOSHISH promotes and advocates for independent living, inclusion, and meaningful participation of persons with lived experiences of mental health conditions and psychosocial disability on an equal basis as others through strategic advocacy and community-based mental health and psychosocial support services. Its projects and programs are in line with UNCRPD, 2006 and the other international human rights standards.

**Purpose**

“KOSHISH’s purpose and relevancy is in order to ensure persons with psychosocial disabilities are able to live independently with inherent dignity and be included in the community on equal basis as others.”
OUR VISION
Mental health and psycho-social well-being for all.

OUR MISSION
KOSHISH seeks to ensure dignified life for people with psychosocial issues through improving and implementing policies and legislation and expanding community-based mental health and psychosocial support.

OUR GOAL
Quality of life of people living with psychosocial problems is improved.

VALUES
- TRANSPARENCY: KOSHISH is an open book for all.
- ETHICAL: Maintaining confidentiality, privacy & right treatment of the beneficiaries.
- INFORMED: Sharing relevant messages, data and statistics.
- EMPATHY: respect for human dignity of persons with mental health issues.
- INTEGRITY: We practice honesty, loyalty and integrity.
- DIVERSITY: Embrace race, ethnicity & respect diverse backgrounds, traditions, culture & knowledge.
- DETERMINED: We will not give up fighting against stigma associated with mental health.
- PARTNERSHIP: We believe in cooperation, together we can do more.
Program

KOSHISH is an advocacy organization which realizes the need for mental health and psychosocial services in the community. KOSHISH works as a coalition of persons with lived experiences of mental health and psychosocial issues and professionals to create a replicable model of mental health and psychosocial support. We are working to introduce mental health and psychosocial support as cross-cutting issues in development as we believe that mental health services are not luxury but necessity like food, clothes, and shelter.

Advocacy & Awareness Program

KOSHISH advocacy program promotes involvement of rights holders and focuses on encouraging right holders, communities, and lawmakers to take steps for review, adaptation and implementation of laws, policies, and programs that protect and promote human rights of persons with or at risk of mental health issues and psychosocial disabilities through increased awareness and advocacy.

KOSHISH emphasizes ensuring their right to live with dignity by safeguarding civil, political, economic, social and cultural rights through equal and quality participation. The advocacy program of KOSHISH reflects the principles of UNCRPD, the concluding observations from UNCRPD committee, and the WHO Quality Rights toolkit. KOSHISH advocates for realization of rights provided by the Constitution of Nepal and in the Rights of Persons with Disability Act, 2017 by persons living with or at risk of mental health issues and psychosocial disability.

Hon. Minister Tham Maya Thapa, Ministry of Women, Children and Senior Citizen in Workshop on “Gender Based Violence and Mental Health” organized by KOSHISH.
Promotion and Protection of Human Rights of Person with Mental Health Problem through Self-Advocacy Project

Mr. Saroj Ojha, Senior Psychiatrist addressing interaction program on “Migration and Mental Health” organized by KOSHISH.

The overall objective of the project is that 'the government increases national budget to the need of mainstreaming mental health into general health'. It emphasizes on advocacy and awareness of human rights of persons with mental health problems in order to promote equal human rights and to reduce all forms of barriers against them. Through dialogues, workshops and interaction in regard to mental health issues with line ministries and stakeholders, this program is working towards educating the state officials and actors on rights of persons with mental health issues.

Moreover, through skill-development of persons with mental health issues, this program is seeking to develop self-advocates for effective engagement of the right holders in the advocacy efforts by KOSHISH.

In 2019, through the project 31 lobby and advocacy activities were carried out with the line agencies and stakeholders.

Achievements
Commitments form Stakeholders for mental health friendly legal framework

In 2019, the project conducted ten workshops, 4 delegations, 4 province level consultation programs and developed and broadcast radio programs both at Federal and Province level focusing on the Current Mental Health Situation, awareness, gender issue, stakeholder engagement and Way forward.
In these events, 30 members from government ministries, political parties, judiciary, constitutional body and bureaucrats expressed verbal commitments to reform, adopt and implement state laws, policies, plans and programs that are mental health friendly and comply with international human rights standards.

“The government is aware about the issues of GBV and mental health and there needs to be proper study to understand how each of us and the government can contribute. We should also think about economic empowerment of persons who have faced violence. Awareness campaigns should be launched as well in regard to GBV and mental health.”

**Ms. Tham Maya Thapa**
Hon. Minister for Women, Children and Senior Citizen

“Mental Health is an important issue but there are few organizations which has its focus there. I will be encouraging developmental partners to incorporate issues of mental health in the projects that are being developed. In regard to disability ID card, of the services made available to persons with disability in the card, we need to incorporate the health component as well”

**Mr. Rajendra Kumar Paudel**
Joint Secretary of Ministry of Women, Children and Senior Citizen
Hon. Minister for Women, Children and Senior Citizen

**Expression of solidarity from Civil Society Organizations and Commissions**

Through advocacy and lobby efforts of KOSHISH, a total of 40 organizations which includes CSOs, DPOs, NHRC, National Women Commission, etc. expressed their solidarity to influence state laws, policies, plans, programs and budget for mental health.

“*The National Youth Council will take necessary measures to protect and promote mental health of youths*”

**Mr. Madhab Prasad Dhungel**
Executive Vice President of National Youth Council
“Mental Health issues are important and so are human right violation of persons with mental health issues. NHRC will take the initiative to monitor the human rights situation of persons with mental health issues who are receiving treatment and of those whose rights have been violated”.

*Anup Raj Sharma*
Hon. Chairperson of NHRC

“Mental health and suicide is a critical issue and while organizations that are specifically working in the sector of mental health like KOSHISH which is doing a good job at it, the NGO Federation will take the issue forward.”

*Mr. Jitram Lama*
President of NGO Federation

**Sensitization on the issues of Mental Health and Psychosocial Wellbeing**

Through this project, KOSHISH has conducted 31 events of sensitization program through which a total of 882 Participants with 352 females and 530 male including representatives from government bodies, CSOs, health professionals, media personnel, constitutional body members, self-advocates and human right defenders were sensitized on the issues of mental health and psychosocial wellbeing.

It the program discussions were also carried out on need of providing adequate budget and quality programs for the promotion of mental health.

**Publication and Dissemination of Newsletter and IEC materials**

4000 copies of newsletters have been published and disseminated by KOSHISH in total with information regarding mental health issues, activities related to advocacy and service delivery carried out by KOSHISH and good practices from around the world relating to mental health. Along with newsletter, KOSHISH also developed and disseminated IEC materials on Suicide Prevention, Rights of Persons with disability act, UNCRPD concluding observations, etc. KOSHISH also produced Public Service Announcements (PSA) for marking World Health Day, World Suicide Prevention Day, World Mental Health Day and International Day of Persons with Disabilities.
Registration of PIL on Electoral Rights of Persons with Mental Health Issues

KOSHISH filed PIL in Supreme Court of Nepal to ensure electoral rights of persons with mental health issues all legal provisions which are discriminatory towards persons with mental health conditions and psychosocial disability.

“We all have to recognize good work that has been carried out. KOSHISH and Matrika Ji have been knocking on the doors of Ministry of Health and Population for a long time and there have been changes in terms of mental health. Therefore, we should recognize that as well.”

**Mr. Mahendra Shrestha**
Chief of Health Coordination Division

“I have visited KOSHISH and the Transit home they are operating. I am well aware of the activities they have carried out over the years. I request others to visit KOSHISH as well and support them in their cause.”

**Ms. Laxmi Giri**
Veteran Actor
Strengthening Stakeholders capacity for Formulation, Implementation and Adoption of Psychosocial Disability Rights Legal Framework

The project was implemented beginning in April 2018 with focus on the protection and promotion of rights and dignity of persons with psychosocial disability through advocacy, and implementation of policy and legislation for the improvement of the quality of life of persons with psychosocial disability. The project strives to make the legal framework of Nepal and its implementation psychosocial disability-friendly and in line with the constitution and UNCRPD. The project also aims to amend the Disability Rights Act (2017) in the line.

The project emphasizes informing and sensitizing stakeholders regarding the rights of persons with psychosocial disabilities. In 2019, the project focused on carrying out activities as Lobbying Meetings, Follow-up meetings, Seminar, Orientation, Interaction, Consultation meetings regarding Universal Periodic Report (UPR), Capacity Building trainings.

Achievements
Sensitization on Psychosocial Disability, Legal Framework and UNCRPD

Under this activities of the project, high level stakeholders such as Members of Parliament, Judges, Bureaucrats and representatives of Constitutional Bodies who are directly involve in policy making and implementation are sensitized on the issues of persons with psychosocial disability, legal framework concerned to persons with psychosocial disability and major provisions of UNCRPD. In 2019, the project was able to inform and sensitize multiple constitutional bodies on the issues of psychosocial disability.
The project also reach various committees under parliament for informing and sensitizing on the issue. Similarly, Judges Society Nepal, Women Judges Forum and Bar Association of Supreme Court were also among the other agencies reached through the project. In 2019, a total of 416 high level stakeholders (271 male and 145 female) were sensitized through the project. The 62 stakeholders expressed verbal commitment to support mainstreaming of psychosocial disability in their respective sectors and organization.

Ram Narayan Bidari, MoP of Nepal presenting his views on Rights of Persons with Mental Health conditions and psychosocial disability.

**Consultation with Persons with Disabilities for UPR preliminary Draft Report**

In 2019, a total of 113 persons with disabilities (72 male and 41 female) were consulted from Province number 3 in Kathmandu, province number 4 in Pokhara and province number 1 in Biratnagar for the preliminary draft report preparation for Universal Periodic Report (UPR). In the events, participants shared about their human rights situation, daily life challenges, issues in accessing justice and future direction. The findings were incorporated in UPR preliminary Draft Report.
“Psychosocial problems and mental health is a serious issue where the judiciary needs to be sensitive. The “Access to Justice Commission” which has been working on the issue of disability giving more priority to access to justice of underprivileged and marginalized groups. Since is a serious issue as this can happen to anyone, anytime thus the representatives from Bar Association of the Supreme Court and the Judiciary as a whole should advocate on the issue of legal capacity of persons with psychosocial disability.”

Sapana Malla Pradhan, Justice, Supreme Court of Nepal

**Workshop to mainstreaming Psychosocial Disability among DPOs**

KOSHISH organized a workshop on Mainstreaming Psychosocial Disability among DPOS in participation 40 persons (22 male and 18 female) from 23 DPOs. The workshop primarily focused on issues on how DPOs can mainstream psychosocial disability in their momentums.
Theater for Marking International Day of Persons with Disabilities

KOSHISH staged a theater dram on rights of persons with disabilities to mark International Day of Persons with Disabilities 2019. A total of 103 persons (60 Male 43 Female) observed the program which included presence of Pashupati Mahat, Under Secretary from Ministry of Women children and Senior Citizens and Mitra Lal Sharma, President, National Federation of the Disabled Nepal.

“We need to work towards prioritizing the concept of inclusiveness in the disability momentum which will help identify the needs of persons with disabilities for promoting independent and dignified life.”

Pashupati Mahat
Under Secretary from Ministry of Women children and Senior Citizen

“It is the responsibility of the state to reduce the social stigma and social barriers towards the persons with disabilities. The federal, provincial and local governments and legislatives bodies have very important role to ensure the rights of persons with disabilities. These kinds of Theatre performances can be a strong way to remove the structural and systemic discrimination towards persons with disabilities.”

Mitra Lal Sharma
President, National Federation of the Disabled Nepal
Save Life- Speak Up for Suicide Prevention

The overall objective of the project is to contribute in the integration of suicide prevention strategies into National Mental Health Strategy and Action Plan. The project was launched in November 2019 and will end by October 2020. This project is expected to increase action from government agencies and organizations working in the field of women, girls, youth, health, and education in suicide prevention through evidence-based advocacy, sensitization, and awareness raising. The project will collect and disseminate feedback to be incorporated into the National Mental Health Strategy for suicide prevention.

Achievement

Television PSA Broadcasted

On the occasion of 16 Days Activism to end Violence against Women and Girls, a Television PSA was broadcasted for 48 spots through Nepal Television, a National television network from November 29 to December 10, 2019.

Round Table Discussion
A round table discussion was conducted with 21 participants on “Gender Based Violence and its association with Mental Health and Suicide” with the civil societies on December 6, 2019. The main aim of the program was to collect the recommendation for the National Mental Health Strategy and Action Plan and to encourage civil societies for working on the issues of GBV, Mental Health and Suicide.

“Social Media misuse is one of the major causes of suicide. Many innocent girls and women often get trapped by social media and their only way out is suicide. We have seen many cases where youths have committed or attempted suicide because they were being exploited on social media. So this kind of activities should be reduced. People should be made aware about the negative aspects of social media.”

Ms. Sunita Danuwar, Sunita foundation

“The Government should take ownership for providing mental health services and rehabilitation services to the people with mental health problems. The reintegration process should not be forceful. If the person do not want to go back to the same place where they had been exploited then they should be sent there forcefully rather, government should provide supports and trainings for their self-sustainability.”

Mr. Pramesh Bade, CWIN

“We should be more focus on prevention rather than thinking about what should be done after the happening of the events. For that everyone should know about GBV and Mental health. So, the subject matter should be included in curriculum. Students should be made aware about it. Further, it should be made mandatory to have counselors in every school and colleges. Well, only one counselor is not enough there must be more than one.”

Ms. Uma Shah, Saathi

Production of IEC materials

Various Fact sheets, infographics and fliers were developed and disseminated for awareness. Most of the dissemination programs were to involve youths in promotion of mental health and suicide prevention.
Collaboration Meetings with Academic Institution

Altogether, 3 collaboration meetings have been done with the three different Academic institutions (St. Lawrence College, Times International College, and G.P. Koirala Memorial College) for raising awareness on suicide prevention. The primary agenda of the meetings was increasing engagement, participation and advocacy effort for the promotion of mental health and suicide prevention.

Orientation Program

An “Orientation Program on Suicide Prevention” was organized on January 4, 2020 in St. Lawrence College for the students studying their Bachelor’s in Social Work. There were altogether 27 participants in the program. The main objective of the program was to increase awareness among the students on suicide prevention and help them to develop some essential skills for the management of distress, suicidal thoughts, ideations, and feelings.

Collaboration and interaction meeting

So far collaboration and interaction meetings have been conducted with National Planning commission, UNDP, Crime Investigation Department of Nepal Police, and Women Commission. The main objectives of the meetings were to sensitize the relevant stakeholders on suicide prevention and seek their accountability for the issue.
A short introductory session on suicide prevention with the title “Right to Life” was facilitated on the occasion of Human Rights Day in Human Rights Magna Meet. Through the session KOSHISH became able to influence participants to incorporate the issues of suicide in the Declaration of Magna Meet.

Program in a Glance in 2020

The advocacy efforts of KOSHISH will be focused on mainstreaming mental health and psychosocial disability in governmental plans and programs, advocating for laws and policies to be mental health and psychosocial disability-friendly as per the Constitution of Nepal and international human rights standards. KOSHISH will also sensitize the general public regarding mental health and psychosocial issues through radio programs, PSA and development and distribution of IEC materials.

Sensitization programs will also be carried out with Members of Parliament (as they are responsible for formulation of new laws and amendment of existing laws) and the Ministry of Law, Justice and Parliamentary Affairs (who is one of the responsible is to draft/amend laws and relevant policies). Our advocacy efforts will also prioritize suicide prevention. Like
KOSHISH had been advocating for the mainstreaming of mental health and psychosocial disability in 15th National Periodic Plan of Nepal. We carried out multiple meetings with National Planning Commission (NPC), Ministry of Law and Justice and Ministry of Health and Population in that regard. KOSHISH also provided written feedback as requested on 11th March 2019. Likewise, follow up meetings were carried out on 27th March with focal person of Health and Education, NPC. There were verbal commitments for mainstreaming mental health and psychosocial disability in NPC Plan.

The 15th National Periodic Plan for 2019/20 – 2024/25 is developed with the theme of “Generating Prosperity and Happiness”. The plan has addressed some of the issues of mental health and psychosocial disability through positive developments. This is the result of continuous advocacy efforts of KOSHISH along with a few likeminded organizations with the National Planning Commission and Ministry of Education and Ministry of Health and Population.

**Education Perspective**
- Free higher education for persons with disabilities required by laws.
- Identification and proper documentation of data of children with disabilities
- Appropriate education opportunities, disability-friendly learning materials, housing and special education as per necessity for children with disabilities.
- Scholarships and health checkups and treatment at local health care centers for children with disabilities

**Health and Nutrition Perspective**
- Developing and extending strong health system and making quality health care accessible at all levels.
- From basic care to specialties, quality health care for every citizen in preventive, promotive, treatment, rehabilitation and palliative care.
- Establishment of rehabilitation centers at all levels in coordination with private and non-governmental organizations.
- “One school, one health worker policy”.
- Accessible mental health services to be extended in all levels.
The constitution of Nepal 2015 has ensured political and social rights along with freedom of expression and has considered every citizen equal before the law. In addition, Nepal has ratified the United Nations Conventions on the Rights of Persons with Disabilities and other key international human rights instruments. Thus, Nepal is obliged to the continued legal integration and its meaningful implementation for the dignified life of persons with mental health problems and psychosocial disability.

After review of the Constitution of Nepal, UNCRPD and other human rights instruments, we found that the voting rights of persons with mental health issues and/or psychosocial disability being curtailed was evident in eight Acts and four directives. The Seven Acts and four Directives prohibited persons with mental health issues and psychosocial disability from being eligible for candidacy and one act prohibited to cast vote.
Community Based Mental Health and Psychosocial Wellbeing Program

CMHP of KOSHISH is an inclusive right based approach with emphasis on mainstreaming Mental Health and Psychosocial Well-being at community level as per need and preference of community people through accessible recovery focused promotive, preventive, curative and rehabilitation services using local resources, empowering local stakeholders and ensuring quality participation of person with psychosocial disability. All community programs of KOSHISH adhere to the WHO Quality Right Tool Kit.

Keeping article 19 of United Nations Convention on Right of Persons with Disability (UNCRPD), at its heart CMHP work to make environment in community for persons with psychosocial disabilities to live independently and be included in the community. The CMHP program of KOSHISH directly contributes mental health initiatives of Government of Nepal, SDG Goal 3 (Good Health and Wellbeing) and work toward ensuring “No one Left Behind”.

Mr. Rajendra BK, CPSW (KOSHISH), facilitating orientation program in Marshyandi Rural Municipality
Inclusive Community Mental Health Program (ICMH)

ICMH Program is a joint initiative of KOSHISH and CBM to improve the quality of life of women, men, girls and boys living with a risk of mental health and psychosocial disability through increased access of quality MHPSS by mainstreaming it in existing policy and program of local government. It is being implemented in Paluntar municipality and Siranchowk rural municipalities of Gorkha District and Besisahar municipality and Marshyandi rural municipality of Lumnung District. The project’s major areas of intervention are community awareness, government health system strengthening, mental health and psychosocial services delivery and empowerment of persons with psychosocial disability. The primary stakeholders of the projects are persons with or who are at risk of mental health and psychosocial disability, persons with disabilities, health workers, Female Community Health Volunteers, teachers, parents and students, etc.

Ms. Gita Ghale interacting with a mother group of Benshisahar on Importance of Mental Health and Psychosocial Well being.

"Society needs to be positive towards the persons with mental health issues. Mental health is a matter of concern for all. It’s not about what government can do with its limited resources rather government must take overall responsibility. We should not avoid our responsibility to formulate necessary policies for mental health."

Bishnu Prasad Lamichhane,
Provincial Parliament Member, Gandaki Province
Achievements

Completion of Baseline Study

In 2019, a baseline study was conducted with the aim of assessing knowledge, attitude and practices (KAP) of local stakeholders and community people toward mental health and psychosocial issues and overall status of resources and services in regards to mental health and psychosocial support. The finding suggested that there is an urgent need of mental health services as well as community sensitization programs. More optimismilly, community people and stakeholders are aware on the need of proper mental health and psychosocial programs and willing to contribute for such programs.

Dissemination of IEC materials and Radio Programs

In 2019, KOSHISH has produced various Information, Education and Communication materials primarily on mental health and common mental health problems. In the project areas 8000 leaflets covering promotive and preventive messages regarding mental health were distributed. KOSHISH also produced and broadcasted 18 episodes of mental health awareness radio program through both Radio Palungtar and Radio Marsyandi. The major themes were mental health, mental health problems, MHPSS services, interaction with stakeholders on mental health, suicide prevention and policy dialogues.
Orientation and Sensitization

In the project, 370 (184 male and 186 female) stakeholders (local and province government representatives, local Community Social organizations (CSOs), Disabled People Organizations and representatives of community groups) were oriented and sensitized on Mental Health and Psychosocial Wellbeing and Rights of Persons with Mental Health Conditions and Psychosocial Disability. They were also oriented on provisions of Rights of Persons with Disabilities Act 2017, UNCRPD, pre conditions of poor mental health and suicide prevention.

Capacity Building of Health Professionals

In the project, 76 (25 male and 51 female) health professionals and 49 Female Community Health Volunteers were trained for providing basic mental health and psychosocial support from Government Health Facilities and in the community. Along with MHPSS support all the participants were also oriented on rights of persons with disabilities.
Mental Health and Psychosocial Support Services

In this project, 205 persons were screened in community whereas 79 persons received mental health OPD services, 5 persons received transit care services, and 61 persons received counselling services whereas follow up and home visit were carried out for 134 times.
The beneficiaries of the services are represented in following table.

### Mental Health and Psychosocial Support Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
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<tr>
<td>Follow up and Home Visit</td>
<td>55</td>
<td>79</td>
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<tr>
<td>Counselling Services</td>
<td>37</td>
<td>18</td>
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<tr>
<td>Transit Care Services</td>
<td>4</td>
<td>1</td>
<td>5</td>
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<tr>
<td>Mental Health OPD</td>
<td>29</td>
<td>8</td>
<td>37</td>
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<tr>
<td>Screening</td>
<td>98</td>
<td>42</td>
<td>140</td>
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### Coordination, Lobby and Advocacy

The project carried out 110 coordination, lobby and advocacy event with local CSOs, DPOs, health agencies and local government for mainstreaming mental health and psychosocial wellbeing, and disability and ensuring availability of free psychotropic medicine at local health agencies.

“The issues of mental health was always missing in School Health Program. We have now realized that it is necessary to include mental health together with physical health in this program”

**Raju Gurung**  
Chief, Siranchok Rural Municipality, Gorkha
“We are in the restructuring process of provincial government and are aware about the sensitivity of mental health issues. We express our commitment for the availability of at least one skilled professional to provide psychosocial counseling in each government hospitals of Gandaki Province.”

*Naradevi Pun Magar*, Social Development Minister, Gandaki Province

“The constitution of Nepal, 2072 addresses health as a fundamental right. The constitutional provision has set the platform for commencement of free basic health service. The Public Health Service Act, 2075 has stated that mental health service is also a part of basic health service. Now it is the responsibility of Nepal Government to ensure the rights of every Nepali citizens to obtain free mental health services. The local government and Health Office will be more responsible towards this fact.”

*Amar Dawadi*
Chief, Health Office, Lamjung

*Mr. Dipak Neupane psychologist facilitating orientation on Suicide Prevention (WSPD2019)*
Apart from above here are some of the achievements made in 2019 through the project:

- **3** persons received Disability Card
- **4** events for making WSPD/WMHD celebration.
- **Rs.150,000/-** allocated by Marshangdi Rural Municipality for FCHV Training on MHPSS
- Municipality Advisory Community Meeting
- Reduction on Stigma and discrimination towards persons with mental health condition and psychosocial disability
- **7** Persons are in process of receiving Disability Card.
- **Rs.75,000/-** allocated by Bensisahar Municipality for Capacity Building of Health Persons.
- Municipality committed for Budget allocation for MHPSS
- Establishment of active and stable early identification and referral mechanism for MHPSS

**Program in a Glance in 2020**

(Way forward)

The regular service delivery, supervision of health professionals, awareness programs at the community level, suicide prevention programs, capacity building of FCHVs and CBOs/DPOs and advocacy and lobby with local government etc. will be continued in 2020. School mental health programs and establishment and empowerment of Self-help groups will be initiated in 2020.

In 2020, Advocacy and lobby with Provincial Government will be increased to ensure mainstreaming of mental health in provincial plan and programs and resource allocation for the promotional activities.
Kamala Thapa (32) is leading a happy life with her family. She had been through a lot in past two years. She started experiencing mental health problems after untimely demise of her daughter for which her family members blamed her. She was locked in a room for two years where she was forced to eat and defecate in the same place. The field staff of KOSHISH found about her from the community people. The field staff visited her family and told them about her problems and need of the treatment. It took almost one month for convincing her family for her treatment.

She received psychiatric consultation and counselling support and gradually improved. After her transition, community people shared that they had never expected Kamala to become healthy again. KOSHISH also helped her to get the disability card. She was the first beneficiary in Lamjung who received disability card for mental health problem in initiation of KOSHISH.

She doesn’t have to rely upon her family members for medication now. So far she had been regularly visiting the Mental Health OPD service for the follow up on her own.
Festival with the family

Bishnu Mahat (38), lives with her family and is able to support in all the household activities. She also spends time in her farm. Five years ago, she was not even able to take care of herself. Her problem started when her husband went abroad for employment. She had to bear all the responsibilities at home by herself; she had to look after her children and in-laws’ parents. The increasing stress led her to experiencing mental health problems. Her family members were unaware about mental health problems, so, they locked her up. She was locked in a small room for four years.

She was then provided with transit care support through the project where she experienced recovery. After improvement, she wished to go back home on the occasion of Dashain and celebrate the festival with her family. She was reintegrated back in her home. She was happy to celebrate the festival with her family in an open space without being locked or confined for the first time in four years. She has been followed up regularly by the psychologist and CPSW of KOSHISH. Her family was also provided psychoeducation on the issues of mental health, and roles of family members in recovery. She is linked to the local health post for regular mental health service. She now want to run a grocery shop of her own, if she obtains any financial support.
Mainstreaming Mental Health and Psychosocial Disability Project

The project was focused on integrating mental health services into primary health care and empowerment of persons with psychosocial disability through Community Based Rehabilitation (CBR) model in Tanahun district. This five year project was started in 2015 and concluded in December, 2019. The project contributed to promote the mental health service seeking behavior of persons with and at risk of psychosocial disabilities, strengthen the capacity of existing primary health care providers, and empower self-help groups of persons with psychosocial disabilities for right advocacy.

In the Final Evaluation of the project carried out by Independent Consultation Firm, it was found that the project was relevant in the context and the methodology used was appropriate. Project was able to identify the extent of mental health issues that existed in the project area. The project was found completely in-line with national policy and the project model and strategy is relevant to the country policy environment.

Achievements

Capacity Building

![Training on identification and referral of mental health issues](image)
Ownership of mental health Outpatient Department service (OPD) by Vyas Municipality

Mental Health OPD has been in operation at Damauli Hospital with the support of Vyas Municipality from the beginning of 2019. The OPD service was first operated by the project from 2015 to the end of 2018.

Livelihood Support

Financial support was provided to 20 persons with psychosocial disability to start or upgrade their own business. The investment was made in small scale businesses as livestock, vegetable farming and dairy. The activity found to have positive impact on the mental health of the beneficiaries as well as was effective in changing attitude of family members and neighbors towards beneficiaries.

The project reached 2,420 people with its awareness program in mental health, psychosocial wellbeing and rights of persons with disabilities. The representatives from Disabled People Organizations (DPOs) and the members SHGs were engaged in the awareness raising activities.

Improvement in Service Seeking Behavior

![Graph showing yearly trend of persons registered for Psychiatric OPD service]

Mental Health and Psychosocial Support Services

![Bar graph showing psychosocial counseling, follow up and visits, and orientation to SHG members]

<table>
<thead>
<tr>
<th>Service</th>
<th>Male</th>
<th>Female</th>
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</thead>
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<tr>
<td>Psychosocial Counseling</td>
<td>242</td>
<td>374</td>
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<tr>
<td>Follow up and home visits</td>
<td>266</td>
<td>423</td>
</tr>
<tr>
<td>Orientation to SHG members</td>
<td>22</td>
<td>28</td>
</tr>
</tbody>
</table>
Leap From The Darkness To Light

Kalpana Gurung (45), lives in Vyas Municipality, Farakchaur. In her own words, she never has had privilege from her family since birth. At the age of 15 she got married and became responsible for household chores. Soon, she became mother of three. Her husband went abroad and thereafter was not in contact with her. Her mother and relative arrange her second marriage.

She believed her new husband would treat her children as his own but that didn’t happen. Her husband was annoyed, disappointed and stressed after not having his own child even after five years of marriage. He then developed a habit of drinking because of which, Kalpana started having panic attacks, loss of appetite and sleeplessness. Her condition constantly deteriorated, however she was not aware of her problems.

She was informed about the mental health OPD service being provided by KOSHISH at Damauli Hospital for mental health problems. She went there for a checkup and was enrolled in the service. Her mental health condition improved gradually and now she has recovered. She joined the self-help group formed by KOSHISH where she was provided with seed money support. She started poultry farming with the seed money support. Within three months, she made a profit of NPR. 19,000. Her husband is sober now. He takes care of her and their children.
Participatory Rural Appraisal in Panchakanya Rural Municipality

The project was completed in two months of February and April, 2019. It was implemented in collaboration of RSDC and Malteser International. The overall objective of the project was to understand the holistic picture of the project area of Panchakanya rural municipality through PRA. Along with the PRA, KOSHISH also carried out a study on prevalence of depression, anxiety and stress in the 302 person sample. The specific objectives were:

- To understand the socio-economic status and spatial distribution of the settlements of the area
- To access the impact of the earthquake on physical, ecological and psychosocial aspects of the community
- To assess the KAP of the community people, health professional, key stakeholders toward mental health and psychosocial issues.
- To appraise the local institutional infrastructure for supporting social, economic and mental health and psychosocial aspects of the community.

The findings suggested, urgent need of mental health support services in the Rural Municipality and found that most of the community people have misconception regarding mental health. Yet, most of the stakeholders expressed their commitment for supporting mental health and psychosocial programs in the area.
Transit Care Service is short term residential support for persons with severe mental health problems who were locked, chained, experienced Gender-based violence, or were abandoned subject to the worst violation of human rights. KOSHISH started transit care service in the year 2011. The beneficiaries are provided with psychiatric consultation and psychological intervention in a therapeutic environment. The transit care service focuses on the reintegration of beneficiaries in their own family/community. So far, KOSHISH has been able to provide Transit Care Services to 685 beneficiaries. The Transit Care Services Program is part of Community Based Mental Health and Psychosocial Wellbeing Program.

Rehabilitation and Recovery of the earthquake-affected abandoned persons with mental health problems through specialized care

The project, was started in 2015 and was extended up to November 2019. The main aim of the project was to support people with severe mental health issues who have been affected by the earthquake to regain a stable mental health condition and reintegrate them in their families and communities. KOSHISH provided transit care services to both female and male beneficiaries through the project.
Reintegration of Marginalized People with Mental Health Issues

The project, is an ongoing project which aims to support the most marginalized people, especially the women living with mental health issues by providing them with mental health treatment and rehabilitation services. More specifically, it provides services to women living with severe mental health issues to ultimately recover and reintegrate after recovery. It also work for promoting awareness about mental health in the community.

Achievement

Rehabilitation Support

In 2019, through the Transit Care Services, 99 women with severe mental health problems received mental health and psychosocial support. Out of 99, 74 women have been reintegrated back in their family and community. Whereas, ten beneficiaries whose families were not identified were linked with the government organizations for their long-term rehabilitation.
Follow Up and Home Visit Services

In total, the outreach workers visited 42 beneficiaries in persons for follow up of progress in daily life. The follow up of all reintegrated beneficiaries was also conducted by phone.

“I am really happy to see the improvement in my daughter’s mental health. She helps me in all the household activities. I can now rely on her and go to work without any hesitation.”

One of the family members, during the follow-up visit

Psychoeducation

During follow up, the family members and community people were also provided psychoeducation on the issues of mental health and psychosocial wellbeing. Altogether, 342 family members and community people (207 women & 135 men) received psychoeducation.
Livelihood Support

Likewise, KOSHISH provided livelihood support to 5 beneficiaries who were experiencing recovery and were having financial difficulties. They were provided with 2 Goats each as part of livelihood support. KOSHISH also explored livelihood opportunities available in the community for linking beneficiaries in the future.

“'My goats are growing in numbers. I am now able to support my family.”

Beneficiary

Care for Care Givers Training

Along with that, KOSHISH conducted six Care for Care Givers programs for the 106 family members (40 male & 66 female) of the beneficiaries who received services from Transit Care Services. The programs were organized for helping family members to share their stresses and learn skills to support recovery of the beneficiaries.

“I thought I was the only one going through the care giving of person with mental health problems but after coming here I was happy to share my feelings and experiences with the ones going through the same. From this program, I have learned to face my problems and to use stress management skills. I will try to utilize it after going home.”

Participant of Care for Caregiver Training
In 2019, by improving and updating transit care services, KOSHISH became able to reduce the average staying duration of the beneficiaries from two months and 21 days to two months and 12 days. The transformations in the lives of the beneficiaries has become strong evidence for KOSHISH to carry out advocacy and sensitization programs with the government and other stakeholders. Finally, the initiative has also contributed to the objective of the Ministry of Health and Population i.e. to support improvement of health for all.

**Program in a Glance in 2020**

In 2020, KOSHISH has planned to construct Therapeutic Transit Care Center. In first phase, The Weight We Carry along with KOSHISH's well-wishers has committed to support for construction of building. KOSHISH will extend partnership with MCC for continuing short-term transit care services in 2020. KOSHISH aims to establish a low-cost model transit care that government can replicate for integrating mental health services in existing government health systems. In this context, KOSHISH purchased a land in Pharping, Kathmandu with the support of Friends of KOSHISH Germany and Himal Partner / Framnes, Norway. Furthermore, Mennonite Central Committee (MCC) has supported in leveling of uneven land, surveying to develop master plan, architectural designs, and to building compound wall for protection from nearby stream.
Confident Kalpana

Kalpana Pariyaar (25), was raised by her aunt. During her teenage years, she worked as house helper where she experienced physical and mental abuse. After that she was unwillingly married to a person who was living with paralysis. Soon, she became mother which gave her happiness but also added financial problems in her already difficult family life. All these situation led her to mental health problems.

Later, she came in contact with a local organization of Okhaldhunga and was referred to KOSHISH’s transit home for mental health care. At KOSHISH, she received therapeutic services. According to her, counseling sessions helped her to alleviate her emotional distress. During treatment at transit care, she got the chance of vocational training for knitting and gardening skills. Now, she has been reintegrated back in her own family. She is confident to deal with her problems and lead her life happily and independently.

"Being at KOSHISH was like finally, finding a place where I can pour out miseries in my heart to the understanding and receptive ears" – Kalpana Pariyaar
Able to walk again!

Shanti Basnet (29) spent 13 years with mental health problem. Her problem started after death of her only brother. She started neglecting her personal hygiene and socialization. Out of shame her family locked her in a room. She stayed there for long time in poor condition which caused her significant difficulty in mobility.

Her sister brought her in the KOSHISH’s transit care. When she was brought for the transit care, she had difficulty walking even in crutches. She improved with regular psychiatric consultation, counseling services, and physical treatment. With the improvement, she was reintegrated back into her home. Her family was oriented on her mental health and physical health. Now, Shanti can walk without any support and her mental health condition has improved. KOSHISH has provided three goats as livelihood support for her. She is now able to support in household work such as; collecting grasses, fetching water, and farm chores.

“We all thought that she will be like this forever but she is now living a new life.”
– Shanti’s Sister
As per the Sustainable Development Goal (SDG), no one should be left behind from any kind of services and facilities as well as in development works. However, people with mental health issues are still struggling with their problems without any facilities. Also, they are outcaste from the development works. KOSHISH is providing community awareness and emergency short-term residential care for the person with severe mental health issues. KOSHISH is trying to build a model community based therapeutic safe house, a transit care service where the persons with severe mental health issues would receive the service in better therapeutic environment and cost effective way.

In this context, KOSHISH has purchased a 3,300 sq.m. land in Pharping, Kathmandu at a peaceful location in April 2019. The land is situated in a peaceful setting surrounded by forest with a small stream running alongside. KOSHISH has completed the survey and development of the master plan. Raising funds for the construction of the building is in progress.

KOSHISH has envisioned the concept of cost-effective model transit care service so that the government could replicate for integrating mental health services in the existing government health system and also the services could be extended in public-private-partnership model with the government.
### PROJECT-WISE EXPENDITURE OF 2019

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<tr>
<th>SN</th>
<th>Projects</th>
<th>Expenditure in NPR</th>
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<tr>
<td>1</td>
<td>Inclusive Community Mental Health Program (ICMH Program)</td>
<td>6,088,069.00</td>
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<tr>
<td>2</td>
<td>Mainstreaming mental health and psychosocial disability in Nepal</td>
<td>2,571,257.00</td>
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<td>3</td>
<td>Community based rehabilitation of the persons with mental health issues</td>
<td>6,899,758.00</td>
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<td>4</td>
<td>Disability Inclusive Disaster Risk Reduction Project</td>
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<td>5</td>
<td>Mainstreaming Mental health in Nepal through Self Advocacy</td>
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<td>6</td>
<td>KOSHISH core Projects</td>
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<td>7</td>
<td>Participatory Rural Appraisal (PRA) Project</td>
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<td>8</td>
<td>&quot;Voices of KOSHISH&quot; -support to self help capabilities for people with</td>
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<td>psychosocial disabilities in Nepal</td>
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<td>9</td>
<td>Strengthening Stakeholders capacity for Formulation, Implementation and</td>
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<td>Adoption of Psychosocial Disability Rights Legal Framework Central Level</td>
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<td></td>
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<td>10</td>
<td>Special Initiatives in Mental Health In Nepal</td>
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<td>11</td>
<td>Recovery and rehabilitation of persons with mental health problems</td>
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<td></td>
<td>through specialized care</td>
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<td>12</td>
<td>Reintegration of persons with mental health problems</td>
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<td>13</td>
<td>Road and ground improvement work in Proposed Therapeutic safe house of</td>
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<td>KOSHISH</td>
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<td>14</td>
<td>Save Life: Speak up for Suicide Prevention</td>
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<td><strong>Total</strong></td>
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### SOURCE OF FUND IN 2019

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<th>SN</th>
<th>Name of Partner Organization</th>
<th>Amount in NPR</th>
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<tbody>
<tr>
<td>1</td>
<td>Mennonite Central Committee (MCC Nepal)</td>
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<td>2</td>
<td>HimalPartner</td>
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<td>3</td>
<td>CBM Nepal</td>
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<td>Felm</td>
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<td>5</td>
<td>Malteser International</td>
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<td>6</td>
<td>Comic Relief</td>
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<td>Support Association of KOSHISH in Norway</td>
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<td>APEIRON</td>
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<td>9</td>
<td>Ministry of Women, Children and Senior Citizen</td>
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