

Community-Led Monitoring: A Pathway to Improved Mental Health Services

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Background

Mental health is a critical but often overlooked component of healthcare systems, particularly in resource-constrained settings. Community-Led Monitoring (CLM) offers a promising approach to bridging gaps in mental health service by engaging communities to assess, monitor, and advocate for better service delivery. This study explores the impact of CLM on identifying and addressing mental health challenges in underserved populations.

Methods

A cross-sectional approach was employed to collect data on mental health service delivery challenges through a combination of quantitative and qualitative methods in 13 states in Nigeria, where NEPWHAN implements CLM, within a period of January to June 2024. Study population included people living with HIV (PLHIV), Key Population (KP) and Adolescent and young People (AYP). Community iMonitor, a digital application, was used to collect feedback from community members, while focus group discussions provided deeper insights into lived

experiences. Quantitative data from the app were analysed using IBM SPSS Statistics 23 while qualitative data using thematic analysis techniques.

Results

Preliminary findings reveal significant barriers to accessing mental health care, including limited availability of services, stigma, and lack of integration into broader health-systems. Out of the 17,657-self reporting, 47.9% of all the study population reported poor access to mental health services, including 48% among PLHIV, 47% among AYP, 43% among MSM, 44% among TG, 40% among PWID and 48% among FSW. The qualitative data findings shows that access to mental health and legal services were identified as major barriers to HIV treatment services by 3 out of 4 of the FGD participants. Additionally, more than one-quarter of the respondents reported experiencing stigma and discrimination from healthcare workers. Community-led efforts highlighted critical needs, such as increased availability of mental health professionals, legal support for mental health advocacy, and access to psychosocial support services.

Conclusions

The integration of mental health into CLM frameworks has proven effective in identifying service delivery gaps and empowering communities. Addressing mental health challenges through community-driven efforts is essential for achieving equitable health outcomes and ensuring health-system sustainability. Targeted interventions and continued engagement with policymakers are crucial to improving mental health services and reducing stigma among PLHIV, KP and the Vulnerable populations.

Recommendation

CLM is a powerful tool to spotlight mental health service gaps, reduce stigma, and push for policy change. Empowering communities ensures sustainable, equitable health outcomes. As thus, there is need to Integrate mental health into all CLM programs, train more mental health professionals, reduce stigma via advocacy & policy engagement, build the capacity of peer educators and CLM focal persons to provide basic psychological first aid and detect early warning signs, and refer complex cases.