

MENTAL HEALTH AND PSYCHOSOCIAL REHABILITATION

Objectives:

- ☐ *to monitor the mental health and psycho-social status of the people and detect mental health and psycho-social problems caused by the war and the deteriorating health care systems;*
- ☐ *to plan and carry out public mental health interventions as needed;*
- ☐ *to coordinate psycho-social and mental health-related activities of the intergovernmental (IGO) and the non-governmental (NGO) agencies and WHO offices*
- ☐ *to liaise with IGOs, NGOs and national and local health authorities; and*
- ☐ *to liaise with the media and provide information on WHO's humanitarian assistance activities.*

New events enhance the number of people in need of help

Update on the situation

The scenario has changed due to the Croatian offensives, the fall of the enclaves in Eastern Bosnia and the NATO/UN interventions.

Prior to the event, WHO had estimated that about one million people were in need of emergency mental health/psycho-social interventions. This means that, if they were in a peace time situation, they would have been offered immediate professional assistance.

The uprooting of more than 200.000 people over the recent weeks has certainly increased the number of people in need of help. Children, adolescents, women and the elderly are the most vulnerable groups we are facing right now. In the long run, the families may suffer even more problems when the home-coming fathers and sons return with their physical injuries and psychological traumas to uncertain social conditions.

In consequence the needs for mental health psycho-social assistance are dramatically increasing. If the problems were caused by infections we would not hesitate to speak about an epidemic spread.

In the former sectors, in the enclaves, in Bihac and in Serbian held territories almost no psycho-social/mental health projects have been carried out in the past. Here we may expect a significant increase in the demands for WHO and other agencies to intervene.

There is a massive need still to induce the self empowerment of all professionals working in the mental health/psycho-social sector as well as in the primary health care system. This self-empowerment is to be induced both through theoretical and clinical training programmes and through development of contexts, where the professionals are able to receive support to overcome their private and professional dilemmas. Without the courageous work of our colleagues under these extremely difficult professional conditions all other efforts were worthless.

In the midst of these overall public mental health threats to the general population, we should not forget the traditional target groups — the mentally ill and the mentally

retarded. Institutions have been damaged and the poverty of many health institutions has caused a severe deterioration in the care and treatment. The destruction of family and social networks has severely reduced the chances of the mentally ill and retarded people to be taken care of outside the institutions.

WHO Mental Health Projects

The WHO Mental Health projects are continuing with special emphasis on the WHO Regional Models for Mental Health. Four projects are on-going in Sarajevo, Mostar, Split and Kotor.

In Sarajevo, the first PTT course has ended, but our mental health team will continue their work over the next few months. The Psychiatric Clinic has been severely damaged. WHO has supported, through the Italian Mental health donation, an emergency restoration of the clinic to enable continuous work. Despite all, the work is still being carried out under very bad conditions.

In Mostar the seminars will continue. Participants from both sides of the Neretva river will be supported and supervised by a WHO team of Dr Narcisa Sarajlic and Dr Milan Kosuta. WHO coordinated plans for a restoration of the mental health structures in Mostar are continuing in collaboration with the EU-Administration, local health authorities, NGOs and Italian mental health professionals.

In Split the seminars will continue through the next semester. The activities are expected to be extended to reach out to primary health care professionals.

In Kotor an intensive mobile team activity has been carried out to map the mental health needs and resources. The reforms on Dobrota Hospital in Kotor are continued as well.

A new Regional Model will start in the Tuzla region in October, when a new international mental health consultant takes up duties based in Tuzla.

New projects are underway focusing on Bihac. Another project aims at strengthening the overview of mental health needs and resources in the mission area as a basis for adequate and coordinated responses to the developing situations.

Brief notes

Professor John P. Wilson, Cleveland USA will join the WHO team in October 1995, to teach at the PTT courses and to make an assessment of the WHO mental health activities to date.

The WHO Special Representative of the Regional Director (SRH), Dr Søren Buus Jensen, besides his duties in the SRH Office, will continue as Programme Manager for the WHO Mental Health and Psycho-social activities.

Physical Rehabilitation

Objectives:

- ☐ *to monitor the health status of the people who were physically injured due to the war and to detect related health problems caused by deteriorating health care systems;*
- ☐ *to plan and carry out rehabilitation interventions as needed;;*
- ☐ *to coordinate rehabilitation activities of the intergovernmental (IGO) and nongovernmental (NGO) agencies and the WHO offices;*
- to liaise with IGOs, NGOs and local health authorities; and*
- to liaise with the media and provide information on WHO's humanitarian assistance activities.*

COMMUNITY BASED REHABILITATION (CBR)

A WHO model project is underway in Mostar in collaboration with the EU-Administration and local health authorities

WHO, the EU-Administration and the health authorities in the Mostar unite efforts in a model project on Community Based Rehabilitation ("CBR-Mostar"). The EUAM funds the set up of the Community Rehabilitation Centre in the Kayak Club. The Mostar health authorities employ the staff. WHO has made the commitment of twelve months of expert support in CBR.

Although the building is not ready yet, WHO consultants have started the preparation of the project in Mostar.

Mostar is expected to be a new energy centre for WHO activities in Rehabilitation. A new international project leader will take up duties in Mostar during the fall. Already based in Mostar are three WHO international staff: Ms Irma Kohlemainen, Physiotherapist, Ms Beate Krieger, Occupational Therapist, and Mr Carl-David Fraser, Assistant Programme Manager.

Ms Beate Krieger holds five hour training sessions weekly for the Velmos Hospital therapists, who will be working at the CBR-Centre.

Training material for sessions to be given in other rehabilitation centres in Bosnia and Herzegovina has been prepared as well as exercise manuals for therapists, as well as for individual disabled persons.

Ms Irma Kohlemainen has set up weekly physiotherapy training sessions for the therapists of the West Mostar Physical Rehabilitation Centre.

All consultants have been engaged in needs assessments and collecting of epidemiological data to create an overview of the rehabilitation situation in general.

In early June, Mr Carl-David Fraser carried out an assessment of prosthetic needs and Resources in East Mostar. Estimates indicate that over 300 persons from East-Mostar alone, are currently in need of prosthetic services. To this number we must add an average of eighteen new persons, that are amputated each month, in medical centers situated along the Mostar, Jablanica and Konic frontline area. As such services have not been available in this area during the war, most amputees are forced to leave for Sarajevo, Zenica, Tuzla and abroad, in order to receive prosthetic services. Prosthetic

and physiotherapy services are a long-term and ongoing process and patients must relocate where such services are available. This unfortunate situation has resulted in a relative exodus of amputees from the Mostar area, with drastic consequences on the socio-economic reintegration of these 300 disabled persons and the social fabric of East-Mostar. It also has a very negative effect on other family members as well as on the "host" city, which also receives its fair share of problems. The latter often turning into a pole of attraction for disabled persons, who must thereafter revert to charity, panhandling and minor mercantile activities on the streets, for lack of state financial support and the absence of socio-economic reintegration programmes for disabled persons.

The most reasonable and optimal solution to the above considerations was identified as the need for a WHO supported Prosthetic Workshop and Comprehensive Training Programme in East-Mostar. Hence, negotiations are ongoing between WHO's PRWV Unit and the Regional Medical Centre, for the implementation of such a programme in September, which will be located in the Velmos Hospital in East-Mostar.

During July, Ms Beate Krieger, Consultant in Occupational Therapy with the CBR project in Bosnia and Herzegovina, continued the weekly five hour training sessions for the Velmos therapists who will be working at the WHO East-Mostar CBR Centre, soon to be operational. Ms Krieger also assured interface between EUAM, RMC and the Kayak Club for the implementation of the CBR Project and has been preparing training material for sessions to be given in other rehabilitation centers situated in Bosnia and Herzegovina.

During August, Ms Kreiger continued with the above mentioned weekly training sessions and carried out assessments in various outpatient clinics (i.e., Ambulantas) to prepare future training sessions. The CBR team also prepared exercise manuals for therapists as well as for individual disabled persons. Ms Kolehmainen set up weekly 45 minute Physiotherapy training sessions for the therapists of the West-Mostar Physical Rehabilitation Centre. She also carried out an extensive assessment of physical rehabilitation units in the Tuzla region, to prepare for upcoming training sessions in the area.

As of 15 August, Mr Carl-David Fraser has taken up duties as in the WHO Mostar Office to bring his support to the CBR Project, the implementation of the Prosthetic Project and to coordinate administrative and logistical activities of the PRWV Unit.

Brief notes

Orthopaedic and Prosthetic Activities

In early July and prior to the military offensive carried out by the Croatian Government Forces in the Krajina region, which resulted in the relative "liberation" of the Bihac pocket and opening of regular convoy routes, WHO's PRWV Unit, in collaboration with UNHCR, successfully made two deliveries of prosthetic materials and parts were delivered to the Bihac Regional Hospital Prosthetic Workshop and to the Cazin Orthopaedic Workshop. After months of waiting and multiple failed attempts to resupply these two workshops, we finally succeeded in delivering WHO designed Prosthetic Kits, for the making of over 250 training and permanent lower

limb prosthesis. We anticipate that future deliveries of WHO Prosthetic Kits into the area will not meet any resistance, now that the direct communication lines have been restored with this area of Bosnia and Herzegovina, now occupied by the Fifth Corps of the Sarajevo Government Forces.

EDP Unit Coordination mission by technical Advisor

At the request of Dr Søren Buus Jensen, Special Representative of the Regional Director and Acting PRWV Unit Manager, the WHO Copenhagen based EDP Unit agreed on a mission to be carried out in the Former Yugoslavia by a Technical Advisor, who is an expert in the field of Physical Rehabilitation. Hence, Dr Bengt Lagerkvist travelled to Croatia and Bosnia and Herzegovina, where he visited Mostar to give his support to the coordination of the CBR Project and the Prosthetic Project. Meetings were held with Dr P. Proccaci (EUAM/Health and Welfare), Dr Immamovic and Dr Edin Alikalic (RMC + Velmos Hospital) as well as with WHO consultants and the remaining Rehabilitation team.

Survey of Physical Rehabilitation needs in the Former Yugoslavia

Mr Carl-David Fraser has completed the statistical assessment of Physical Rehabilitation needs in Former Yugoslavia and the final report is currently being edited prior to printing. A comprehensive final report, together with a Statistical Abstract and Mapping of the current needs in terms of Physical Rehabilitation in Former Yugoslavia should be available for distribution by September 1995.

VOICE OF THE FIELD

Mostar Field Office

During July the security situation was deteriorating. Three persons were killed, among them one child and several were injured during daily shelling in East Mostar. At the end of month the situation aggravated in the entire area of Herzegovina with constant general alert alarm and shelling of both East and West Mostar, as well as the Herzegovina towns of Citluk and Siroki Brijeg. One shell fell on the roof of the European Administration Headquarters, Hotel "Ero". Citizens were advised to decrease their movement and all public places were closed down. East Mostar had a curfew hour of 21:00. As of 15 August, the situation has calmed, but with a frequent general alert.

Activities — As for drug management, WHO has once again supported the exchange of drugs between East and West Mostar.

PSF has been selected as the implementing agency according to the WHO terms of reference. The programme began in August and is funded by EUAM with WHO acting as advisor. It consists of activities to improve the management of procurement, storage and distribution of drugs in Mostar.

PHC/Family Health — A family health training education course was held daily from 13:00 to 15:00, for five weeks. Central and local authorities of the Ministry of Health have been participating under the coordination of WHO. About forty General Practitioners and nurses from East and West Mostar have been following the course.

Mental Health — Meetings have been organized with EUAM and local authorities to finalize the programme of rehabilitation of the mental health system in Mostar according to the community based approach. Mental health kits have been distributed.

Laboratory supplies — Microbiological laboratory equipment has been delivered to East Mostar.