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Title of LIA project:

From Community to Hospitals: Addressing the Mental Health Crisis in Ghana Through Psychological Intervention, Mental Health Advocacy, and Awareness

It's estimated that around 650,000 individuals in Ghana suffer from severe mental disorders, with an additional 2.17 million experiencing moderate to mild mental health issues. Despite this significant need, there are only about 38 psychiatrists available to serve the entire population, highlighting the severity of the mental health crisis in the country. My project with Vocational Impact involved 3 different volunteer placements, each offering valuable insights into the diverse ways this crisis manifests across different socioeconomic backgrounds, age groups, and environments. From working with children to adults, and in settings ranging from rural communities to psychiatric hospitals, I utilised various psychological approaches to address these challenges.

Ankaful psychiatric hospital

One of my placements took place at Ankaful psychiatric hospital located in Cape Coast, which is one of only three psychiatric hospitals in Ghana. I spent 3 weeks at this placement and worked over many different sectors and wards including drug rehabilitation, occupational therapy and psychological counselling.



Narcotics anonymous



A significant portion of my time was spent assisting with the Narcotics Anonymous program, a 12-step drug rehabilitation initiative aimed at helping addicts achieve sobriety. Twice a week, I had the opportunity to mediate sessions, fostering discussions about participants' experiences, thoughts, and opinions. This role enhanced my emotional intelligence, particularly in understanding the boundaries of discussion and knowing when it was appropriate to ask questions and how to encourage individuals to open up. In addition to my role in these sessions, I independently led educational talks on topics such as emotional regulation, self-esteem, and finding purpose. These talks were designed to support recovery by teaching individuals how to manage or cope with challenging situations without resorting to drugs.

Being involved in this program was an eye-opening experience. It felt like a privilege to build close relationships and earn the trust of individuals who shared their life stories and struggles with me.



The program not only has a high success rate but is also crucial in a country like Ghana, where I was surprised to learn that drug abuse is a significant problem. Drug abuse was the most common diagnosis at the hospital, largely attributed to its use as an escape from poverty and lack of purpose. Working with these individuals and witnessing the positive changes they made in their lives, partly due to the advice and emotional support I provided, has inspired me to potentially pursue a future career in drug rehabilitation programs.

Psychological counselling

I was also deeply involved with the psychology unit, where my role included facilitating therapies, counselling sessions, and assisting in the formulation of diagnoses needed for ward admissions. During my time in this unit, I encountered a wide range of cases, from sensitive rape cases to drug-induced psychosis. To prepare myself for these sessions, I conducted extensive research on case files, which was essential for understanding and contributing effectively.

Through these experiences, I observed how different the approaches to talk therapy are in Ghana compared to the UK. While I learned various questioning techniques and therapeutic methods, when given the opportunity to conduct my own counselling session, I instead chose to use my own client-centred approach. This allowed me to personalise the sessions and focus on uncovering the root of the problem, which then formed the basis for tailored treatment plans. Having the confidence and courage to implement my own approach was incredibly rewarding, as it led to breakthroughs that professionals had struggled to achieve in Ghana. This experience resonated with the importance of choosing a leadership style that

aligns with my character and values, rather than merely adopting others' methods that may not work for me personally.

In addition to my work in the psychology unit, I spent significant time across six different psychiatric wards. My role involved observing and recording patient behaviours and interactions to build comprehensive case reports. I then collaborated with a team of professionals to make informed treatment recommendations. This experience tested my resilience, as some days were particularly challenging due to intimidating behaviours on the ward, compounded by the attention I received as a white woman in this environment. However, persevering through these uncomfortable situations was crucial for my growth.

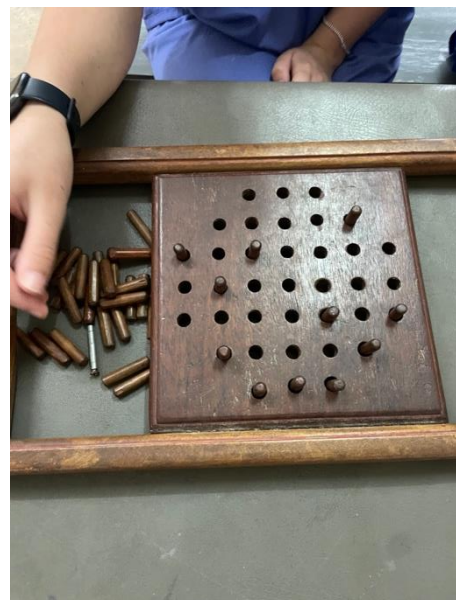


I also took on a leadership role within my volunteer group, especially when navigating the wards, thanks to my previous experience in support work. By paying close attention to behavioural cues and subtle changes, I was able to adapt our approach and make decisions that ensured the safety of everyone in the group. This experience was impactful, as it made me realise that I possess more courage than I had previously believed, being able to manage and thrive in challenging situations. I also gained more confidence, expressing my opinions to professionals on how they could improve treatments despite power dynamics and differences in status.

Occupational therapy

Before starting my placement, I didn't anticipate being involved with the occupational therapy department, and I was pleasantly surprised by how much I enjoyed it. Occupational therapy focuses on helping individuals regain independence in their daily lives, whether through developing motor skills, cognition, or emotional control. During this placement, I learned how to evaluate individuals using the Model of Human Occupation Screening Tool, which involved keen observation and assessment.

I also had the opportunity to facilitate a range of therapies, including art therapy and motor skill development. These sessions involved teaching both individuals and groups how to play games that required cognitive engagement and fine motor skills. My role included monitoring their progress and adapting the games to ensure everyone could participate, even if they weren't directly playing. For example, for those who were more socially withdrawn or lacked the confidence to play, I encouraged them to take on the role of the adjudicator, keeping score and still contributing to the group activity. This experience reinforced the importance of leadership skills in making everyone feel valued and part of a team.



Throughout these activities, I witnessed remarkable progress—not just in clients' game scores, but also in their social abilities and critical thinking. They learned to evaluate and justify their decisions and actions, which was a significant step forward in their development. In addition to these activities, I also assisted in anger management sessions. Although I personally haven't struggled with anger, I was able to empathise by drawing on

my own experiences with other strong emotions. By shifting perspectives and understanding their challenges, I helped clients develop strategies to control their anger, marking a crucial step in their treatment plans. This placement was incredibly insightful, and I gained a deep appreciation for how simple tasks and games can significantly impact individuals' cognition and motor skills. These activities not only foster skill development but also play a crucial role in improving everyday living and preventing further decline. Gaining experience within this department has inspired me to look at occupational therapy as a career option or how it can be integrated into behavioural interventions.

The Children

One significant aspect of my volunteer experience was my placement at Becky's Foundation, an orphanage in Senya Beraku that cares for 46 vulnerable children ranging from ages 5-18. These children came from a variety of challenging backgrounds, including extreme poverty, parental loss, neglect, sexual abuse, and child slavery.

During the placement, my primary focus was building relationships with these children through a variety of activities such as cooking, playing games, and organizing academic and sport competitions. I also led educational sessions on important topics like mental health, career development, sexual and reproductive health, and sexual harassment. Although I had developed confidence in public speaking through the Laidlaw program, presenting these topics was often challenging due to cultural differences. For example, discussing sexual reproductive health required careful cultural sensitivity, as the children were not previously educated on safe sex practices, with abstinence being the expected norm. Balancing respect for cultural beliefs while still providing essential information was a valuable learning experience in cultural competence.



In addition to the educational talks, I conducted both individual and group counselling sessions, which was one of my key goals going into the program. I supported children struggling with learning difficulties, bedwetting, and general mental health concerns. During this experience, I learned how to foster a safe, non-judgmental environment where the children, despite not knowing me well, felt comfortable sharing their concerns and trusting me. I believe this is a vital skill, not only in this setting but also in broader leadership contexts. Whether a team member has a concern or feedback, it is essential that they feel they can approach you as a leader without fear of repercussions or dismissal.



Throughout these sessions I realised a major issue for many older children was the pressure to excel academically, as scholarships were their only route to further education, and these required exceptionally high grades. This academic pressure often took a toll on their well-being. To help alleviate their stress, I provided tutoring and guidance on coping mechanisms for exam preparation and managing anxiety.

This placement was especially impactful for me because, despite the children's limited resources, they displayed remarkable resilience, ambition, and joy. Every child had a dream and a goal, and my role was to help them take steps toward achieving it. Working with young children for the first time was emotionally challenging, particularly when faced with the harsh realities of their life stories. However, I developed the ability to remain composed and maintain emotional control, which is a crucial skill. Being able to manage my emotions allowed me to focus on making decisions in the children's best interest, and this ability to separate emotion from action is something I will carry forward in my future career. On a

personal level, this placement has deepened my appreciation for the opportunities I have and has changed my perspective on what truly matters in life. Leaving was bittersweet, but my heart was full as I said my final goodbyes. Their reactions and gratitude confirmed that I had made a meaningful impact which is something I am immensely proud of.



Fetteh and Kasuoia community hospitals

My final placements took place in the psychological counselling and mental health units of community general hospitals. My placement at Fetteh hospital involved a significant amount of administrative work and diagnostic consultations. It was here that I learned to

independently conduct mental state examinations, leading to diagnosis and treatment recommendations. However, I found this placement particularly challenging due to disagreements with the practitioner I was assigned to work under.



His approach to practice often did not align with standard procedures or the diagnostic guidelines outlined in the DSM-5. He was quick to prescribe medication without thorough consideration, which concerned me. I took it upon myself to question the information he provided and challenge some of his decisions and requests, despite the hierarchical differences. Although this was difficult, I was confident in my knowledge and felt obligated to address practices that could negatively impact patient care.

While the practitioner did not openly acknowledge my concerns, and at times dismissed my input, I remained firm in voicing my objections. I am proud of my ability to speak up, even in uncomfortable situations. This experience taught me how to navigate working with someone whose methods I disagree with and reinforced the importance of standing up for ethical practice in a team setting.

During my placement at Kasuoa's Mother and Child Hospital, I shadowed a clinical psychologist and gained the opportunity to observe therapy sessions involving various complex cases such as depression, OCD, gender dysphoria, and anxiety. This experience gave me valuable insight into how different disorders manifest, which is crucial for a future career in clinical psychology or working with individuals with complex needs.

I found this placement particularly beneficial as, in my current role as a support worker, I primarily work with individuals who have personality disorders and autism. This experience allowed me to expand my knowledge and provided exposure to a wider range of mental health conditions.



Cultural experience

Before arriving in Ghana, I'd be lying if I said I wasn't anxious. I was fully aware of the cultural and lifestyle differences, and the thought of living there for six weeks felt daunting. One of the most striking differences I encountered during my placements was the low standard of healthcare. Many individuals had to pay high prices for poor-quality care and unsanitary conditions, which made me truly appreciate the healthcare system in the UK, despite its imperfections and ongoing challenges.

I felt privileged to be taught and to experience the rich history of Ghana, learning about the slave trade and the immense hardships the country has endured and continues to face. Visiting the Elmina and Cape Coast castles and dungeons where individuals were held before being auctioned and shipped away was harrowing but a profoundly eye-opening experience. Additionally, learning Ghanaian Twi, one of the main languages, was a rewarding challenge. The local people were genuinely appreciative of my efforts to speak their language, seeing it as a gesture of respect and friendship. Alongside this I was excited to use the language I had

learnt at work as many of my colleagues are Ghanaian. I soon realised music and dance are integral to Ghanaian culture, with traditional songs, dances, and celebrations deeply woven into daily life. Although I'm not a great dancer, I thoroughly enjoyed participating in the festivities—it was a joy to be included in such a vibrant aspect of the culture.



Economically, I tried to prepare myself for the reality of the conditions before I arrived, but it was still a shock, particularly when working in the orphanage. Seeing children without pillows, many sleeping on the floor, and having no access to books or shoes was heart-breaking. Yet, despite these challenges, the children were incredibly joyful and grateful for every moment we spent with them. Personally, I'm proud of how I coped with the harsh living conditions over such an extended period. Despite the frequent blackouts, food shortages, and placement difficulties, I stayed positive and was able to adapt. This

experience has contributed significantly to my personal growth, showing me that I can face and overcome tough situations if I remain determined and resilient.



The Future

Reflecting on my future after this journey, I find myself uncertain about pursuing a career in clinical psychology. This experience has helped me realise that I want a career that offers more balance, as I seek a life where I don't have to compromise my own mental health. I aim for a role that challenges me while also bringing personal fulfilment and happiness.

Despite this, my passion for mental health and behavioural intervention remains strong, and I'm still considering roles in therapy and counselling. Additionally, I'm now exploring the possibility of working as a civil servant in psychology departments within the prison system, focusing on drug rehabilitation and wellbeing programs. Moving forward, I plan to explore different sectors after completing my degree before committing to a specific field or deciding whether to pursue a doctorate in psychology.

To conclude this report, I would like to express my sincere gratitude for the opportunity I have been given. I am deeply thankful to the Laidlaw Foundation, and specifically to

Matthew Penhaligon and Rebecca Shaw, for their unwavering support and for providing me with this life-changing experience.