



The Government of Japan



# SUPPORTING PSYCHOSOCIAL HEALTH AND RESILIENCE IN LIBERIA



**THE WORLD BANK**

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## LIBERIA: Country Context

- One of the poorest countries in the world with GDP at US \$370 in 2016
- Liberia ranks 177 out of 188 countries in UNDP Human Development and Gender Inequality Index
- Fragile state with economic and social consequences of two civil conflicts (1999-2003) and Ebola crisis (2013-15) and high vulnerability to external shocks
- Poor governance and weak institutions inhibit effective service delivery (i.e., in health and education) and the development of private sector
- Post-war reconciliation is incomplete and remains high on the government's agenda



## Country Context cont ....

### Ebola shock!

- Reduced growth from projected 6 percent to less than 1 percent for 2014;
- Adversely affected the already fragile employment situation as a result of the impact of the Ebola crisis
- Hiked inflation with adverse impact on food vulnerability;
- Inability to deliver key social services including basic health services leading to preventable deaths.

### Ebola recovery plan

- Government prepared an Economic Stabilization and Recovery Plan (ESRP) that clearly defines appropriate policies and strategies aimed at stabilizing and stimulating the economy.

## Introduction and Background Information

- Available research shows that mental health and psychosocial issues largely stem from the civil war which lasted from 1989 – 1997 and 2001 – 2003 affect a large portion of the population in Liberia,
- Significant portion of the population experienced various traumatic events with limited attention.
- Johnson et al 2008 found that:
  - 40 percent of the Liberian population self-reported symptoms characteristic of major depression
  - 44 percent noted indications associated with post-traumatic stress disorder (PTSD)
- The 2010 Global Burden of Disease (GBD) revealed mental disorders in Liberia account for more disability-adjusted life years (DALYs) than any other non-communicable disease (NCD).

## Background Information cont....

- Scientific evidence found linkages between these and other mental disorders and reduced functioning and engagement in high-risk behaviors (e.g., substance abuse and interpersonal violence).
- Left untreated, they can hinder an individual's ability to fully and productively participate in daily life with consequences since Liberia relies on the population for its short- and long-term recovery.
- In addition to the individual-level impact, available research points to the impact of traumatic events on both community and family ties.
- National Mental Health Policy (NMHP) developed a in 2009 to address psychosocial and mental health needs
- Operationalizing the NMHP, however, has proven to be a challenge - largely due to an insufficient number of trained mental health care workers and lack of resources to cover implementation costs

## Impacts of EVD Outbreak

- EVD outbreak had negative impact on the mental and psychosocial health of the population.
  - Preliminary reports from the field highlighted the toll of EVD outbreak on community and individual psychosocial well-being
- Staff at Ebola Treatment Units (ETUs) and Community Care Centers (CCCs), and burial teams (“first responders”) were in particular need of psychological care and support.
  - Staff face serious stigma in their own communities in addition to confronting suffering and death on a daily basis,
  - High levels of stress, grief, and fear they consequently could have led to less adherence to infection prevention and control protocols (including the appropriate use of personal protective equipment), thus increasing their risks of infection and continued disease transmission.
  - In the face of stress, some first responders reportedly resorted to maladaptive coping behaviors including excessive alcohol use.

## Justification for Psychosocial project

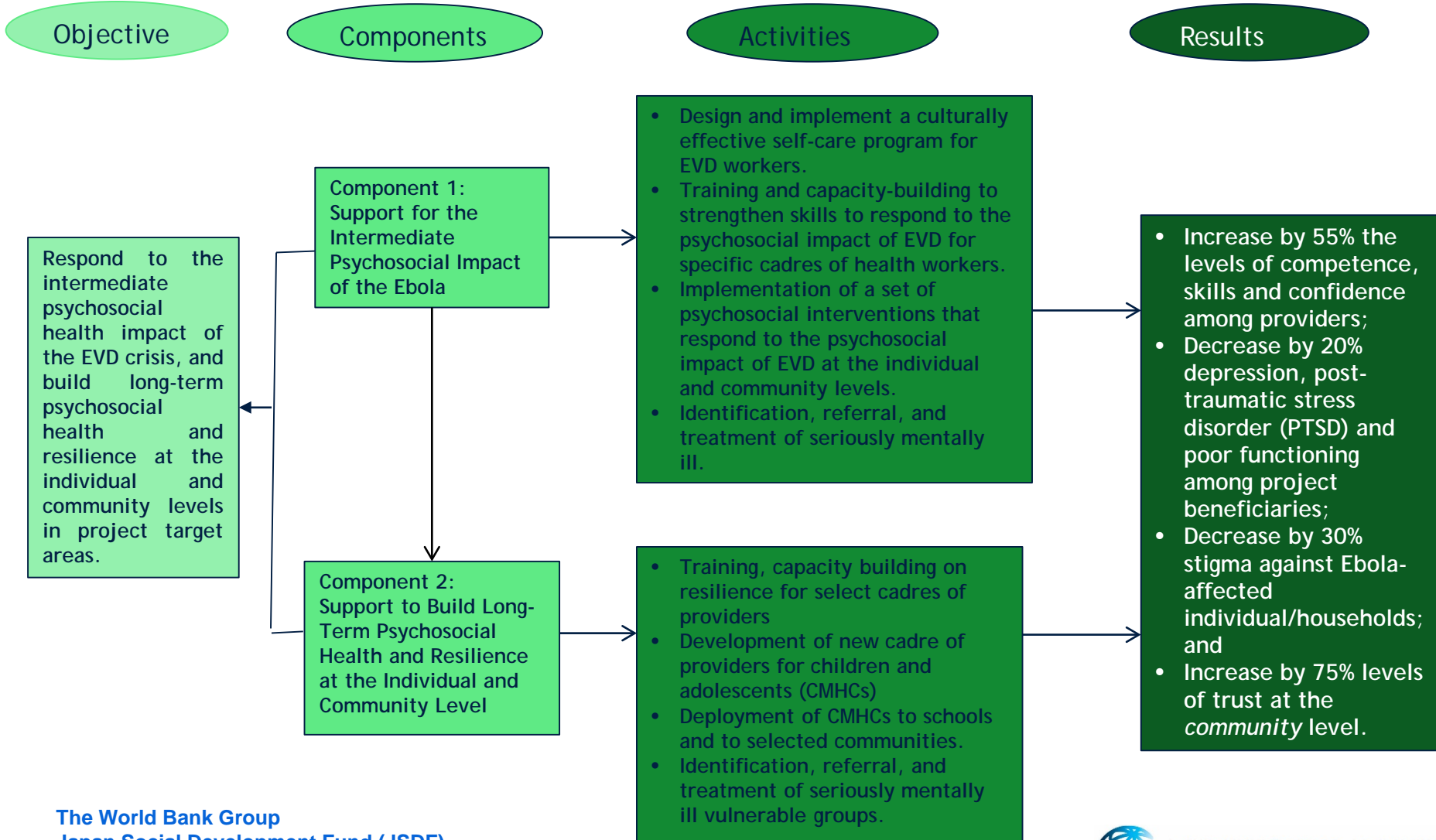
- Address psychosocial health impact of the EVD outbreak at both the individual and community levels, whilst also building long-term resilience and psychosocial health.
- Strengthen protective factors as a means of promoting resilience. Individuals who are resilient are more likely to demonstrate an adaptive stress response, recover from stressful events, and be less susceptible to stress-related psychopathologies and poor mental health.
- Develop positive interactions with the broader environment, such as those with family, peers, school/work, community resources, and social structures and institutions
- Project implemented using a community-based approach to support and strengthen existing community- and family-based practices aimed at promoting resilience and recovery.



## Justification for Psychosocial project

- Project's design and objectives well-aligned with:
  - GOL's Psychosocial Response Strategy and Procedures Addressing the Needs of Persons, Families and Communities Affected by Ebola in Liberia.
  - National Mental Health Policy and the Operational Plan for Accelerated Response to Re-occurrence of Ebola Epidemic.
  - Country Partnership Strategy (CPS), which highlights improvements in human development as one of the Bank's strategic areas of focus in Liberia, with investment in the health sector noted as being critical for Liberia's transformation from a fragile state to a middle-income country by 2030.

# Projects Results Chain



## Beneficiaries

- *Target Population & beneficiaries:*
  - 300 communities in Montserrado and Margibi counties
  - Approximately 19,000 and 50% of health centers in counties
- *Implementation period:* 3 years (although 9-month extension in-process)
- *Implementation agency:* The Carter Center