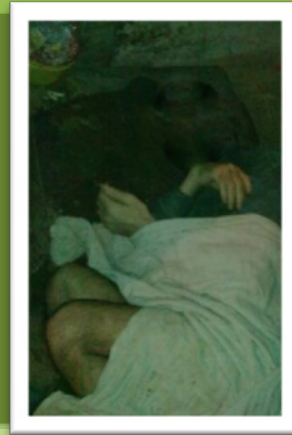


# Chhahari

## Linking the Disconnected



Issue 1: May 2011

## Contents

- 2 Public opinion
- 3 Activity highlights
- 3 Outreach Street Project
- 4 Recent happenings
- 5 Fundraising



Dr Chhatra Amatya, Chairperson

## About our work...

Chhahari Nepal became an NGO in April 2009. It emerged as a result of an initiative from a group of people committed to make a difference for mentally ill homeless people on the street of the Kathmandu valley.

From the beginning it was acknowledged there was no quick fix response to the wide range of problems and issues faced by mentally ill people on the street and their families. Therefore the development of ideas engaged a lengthy process to identify what might be possible.

Additionally, we realised the limitation of financial resources available for mental health. These discussions provided a space for anyone interested to develop support for mentally ill people and their families.

Our position was enriched by the contributions of a wide range of people from Nepal as well as overseas. For 4 years under the auspices of the St Xavier's Social Service Centre, the Chhahari Nepal project, coordinated by Gael Robertson, initiated a range of activities to advocate for the development of mental health services along side promoting the rights of mentally ill men and women. During this time a partnership was established with Basic Needs, a UK INGO, working on mental health and development. Similarly, Koshish, established by Mr Matrika Devkota, a former member of the Chhahari network, has also gone on to work within the mental health sector.

Chhahari Nepal continues to be committed to the development of a representative mental health 'users' voice. Since our early days, when only a few other NGO's worked in mental health, we are encouraged by the significant and positive change towards mental health.

This is evidenced by the increased number of NGOs as well as the Government of Nepal's involvement in mental health. However country wide the need continues for sensitivity towards as well as an understanding of mental illness. So people who experience mental illness as well as their families experience inclusion by their community and can access appropriate and localised mental health services.

# Public opinion

## Speaking through the heart

There are times when I feel that the world is filled with selfish people who discriminate on the basis of mental health; we enjoy branding people as 'normal' or 'abnormal' but we tend to forget that mentally challenged people are helpless and have no control over how they react and behave.

Mentally challenged people are looked upon with disgust by the public; but more frustrating is the neglect that the state and the government. Looking outside our immediate environment and we will find more than one mentally challenged person living a life of utter neglect, but the question that strikes my mind is: Isn't there any help for these people? Aren't they

a part of this country and does the government really feel responsible towards them?

If yes, then where are the plans and policies to create a better environment for mentally challenged people? Because they too require adequate care and support. I personally feel that mentally challenged people are more vulnerable and their security is at risk of being compromised and they are more likely to be the victims of physical, emotional and mental abuse.

Therefore, I personally feel a critical need to gather enough public interest towards this important issue because our

interest and advocacy in the field of mental health may also act as a positive pressure mechanism for many organizations and government bodies to act responsibly and to seriously consider the issue of Mental health.

Everyone should strive to create a society where everyone is treated equally and no one is judged on the basis of their mental capacity. The actions of mentally ill people may not make sense, but we should and can feel their pain through the silent calls of their heart!

- Ayush Joshi  
Radio producer, SSMK

## Questions arise...

While talking about people who are suffering from mental illness, what we see is that society does not care about them neither do they listen to what they say. Their way of life is very different from the norm, as mentally ill people seem to be happy whether they get shelter or not, or whether they get food or not. Often mentally ill people are found at roadsides or other public places because they have been cast out by their families and communities. They are often preoccupied with their own thoughts and they don't follow the norms and values of society. But behind that there is the bitter reality that they are uncared for and invisible to their own society.

If I am honest, then if I have to say what I feel about people who are mentally ill, then I feel very pity for them.

I feel that they do not have control over their life. But, at the same time feel that I may be wrong and that these may only be assumptions on my part. Sometimes I feel anger towards their families because I feel they're not acting responsibly towards them which are contributing to these conditionings. I started to think about their family history and why they left in such a condition and are not being cared for. What causes them to be in such situations? What will their future hold? Why do people make fun of them and why are there misconceptions about them?

I have noticed that the most vulnerable are women. I feel that the reasons behind this are a culmination of various complex factors ranging from our patriarchal society, violence against women and different kinds of sexual harassment.



recognizes the impact of mental illness and funds as well as helps to setup organizations to treat the mentally ill, society will not take their human rights seriously and their safety cannot be guaranteed.

Though I think about them all the time. The reality is that I have done little for them and find it difficult to provide ideas to help them. Questions constantly arise in my mind "why are they in such a life?", "Who shall be responsible for them?", "Why can't we do anything?", "Will they get treatment or will they be rehabilitated?"



## Activity highlights of 2009/2010

During 2009/2010 Chhahari focused upon enhancing public awareness and making existing institutions more responsive to diverse mental health needs.

### Street Drama

On the occasion of World Mental Health Day on 10 October 2010, CNMH organized a Street drama to promote awareness.

The core message of the drama was to highlight "*Family support and care*" as being vital to the improvement in the health of mentally ill people.

Held at the Jawalakhel junction, the drama grabbed the attention of a huge crowd. At the end, it was well appreciated by the audience, which included local residents as well as commuters.

Due to the success of this project, CNMH plans to organize other such dramas in the future targeting specific issues, in other localities.

### Dance Therapy Workshop

In 2010, Chhahari started promoting Dance therapy as an alternative treatment approach to endorse positive mental health in Nepal.

In order to promote this alternative approach, a one-day workshop on "*Dance Therapy as recreational activity*" was organized on 28 March 2010.

It involved discussing the approach as well as practically conducting sessions.

### Input to the Health Sector Reform Program Development

In 2010, Dr Chhatra Amatya and Gael Robertson took part in discussions organized by the Government of Nepal on Health Sector Reform.

One of the most important outcomes has been the increased attention provided to mental health issues, rights and services by the government.

CNMH, however, believes that more needs to be done and is hopeful that more interactions can be planned for 2011.

## Outreach Street Project

In February 2011, CNMH initiated an outreach action research project to begin direct contact with mentally ill homeless and link them with existing service providers as well as locate and support their family members.

Since its establishment, three outreach workers: Ms. Ashmita Pariyar, Mr. Kamal Thapa and Mr. Prajol Rai, from the NIM Church have been working with 31 mentally ill and homeless people located within Lalitpur municipality of Kathmandu valley.

The principle basis for the outreach street program has been the need to respect the individual's rights.

As such, the main task has been to build up and maintain relationships with the targeted individuals. It has involved making first contact, slowly building up recognition and trust, and assessing his/her physical and mental needs.

Efforts are also underway to trace mental health histories and family members to provide detailed

information for referrals. Where necessary, provisions of food and clothes are also provided.

All these activities have been undertaken, by keeping the necessary authorities – police and health services informed.

Presently, contacts with 9 families of the 31 individuals have been made. Efforts are currently underway to trace for the remaining families.

Simultaneously, efforts are also being made to establish networks with various organizations that are able to provide support and care. But, our experiences to date show that resources are scarce and even they are limited in what they can provide to the client group.

It is hoped that by creating a good network among various organizations, as well as using the network of NIM Church of Lalitpur, the project will be able to refer individuals, as per their needs, as well as be able to locate and support the family of the mentally distressed.

Through this process, it is hoped that the mentally ill will be slowly integrated back into their families and society.



### Some Facts and Figures:

- Total number of MIH in contact: 31
- Males: 21 (68%) Females: 10 (32%)
- Married: 10 (32%), Unmarried: 7 (23%), Unknown: 14 (45%)
- MIH originally from Kathmandu: 10 (32%), Outside Kathmandu: 6 (19%), Unknown: 15 (49%)
- Family members that CNMH is contact with: 9
- Family members who are willing to provide support: 6

## Recent Happenings 2011



### Visit by Rev. Robertson

Rev. Jim Robertson from the Barn Church, Scotland, visited Chhahari in April.

His visit included interactions with the outreach workers of the street program Mr. Kamal, Ms. Ashmita and Mr. Prajol, along with a walk through the streets of Lalitpur.

Chhahari was also pleased to welcome Rev. Robertson to the office by organizing a welcome meeting with the board members; during which issues, views and ideas regarding homelessness and mental health were discussed.

During the meeting, the chairperson of CNMH Dr. Chhatra Amatya also exchanged tokens of love from the Barn Church and well-wishers of Chhahari.

The insights, comments and suggestions provided by Rev. Robertson were appreciated by all.

Chhahari would like to thank him, the Barn Church and the Gorebridge Church for all their support and encouragement over the past years.

### Addition to the Chhahari family

In March, Mr. Anil Shrestha was appointed as the Program Development Officer (PDO) at Chhahari.

With a background in Public Health, Mr. Shrestha will be responsible for the development and functioning of the organization.

Similarly, in April, Ms Anju Regmi, a first year Masters student of Social Work at St. Xavier's College, also started her traineeship at Chhahari. She will be with the organization for the next six months.

The Chhahari is pleased to welcome both Mr. Shrestha and Ms Regmi to the CNMH family.

## 3<sup>rd</sup> and 4<sup>th</sup> Kathmandu Marathon



## Fundraising Kathmandu

In order to raise funds as well as awareness about CNMH and mental health needs, board members from CNMH took part in the third and fourth Kathmandu Marathon 2009 and 2010, respectively.

## Scotland

My name is Mel and I am married to Jennifer, we have always had a great love for walking so doing this walk was a pleasure and added to the list of others we have done in the past.

We arranged the walk for May which in the past has been the perfect time for walking weather wise, not too warm and wet. This proved right as we hardly had to wear our waterproofs which added to the enjoyment but equally they had to be carried oh and in case you are wondering, our main luggage went on before us each day as we stayed in bed and breakfast or hotel accommodation as my wife does not do camping!

If you have ever had the chance to see a map of Scotland you would have seen what looks like a big split running diagonally from west to north-east. This is called The Great Glen.

The glen starts at Fort William which is on the north tip of Lock Linnhe and consists of another 4 Lochs which are Loch Lochy, loch Oich, Loch Ness and Loch Dochfour.

These Lochs are connected by the Caledonian Canal which is 62miles in total or 100km. The canal was built by a Scottish engineer called Thomas Telford.

The history of which is extensive but if you are interested I would be more than happy to supply you with info at another time!

Our walk was approximately 84miles, which we did over 5days. The first 2days we walked the Canal path to south Laggon and then the rest was through mostly forests, onto Inverness where we ended the walk.

The walk held some beautiful scenery, was fairly flat and only one or two hills to get up and over and thankfully we had no blisters on the feet or any other injuries and as with most walks at this distance you meet some very nice fellow walkers along the way.

Overall, it was our pleasure to walk for such a noble cause to support mentally ill people on the street in Nepal.

- Mel Third





**CHHAHARI NĒPAL**  
for mental health

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