

## Background

In low and middle income countries, 75% of people do not get the mental health services that they need





The goal of **PRIME** is to generate world-class research **evidence** on the implementation and **scaling-up** of **treatment** programmes for priority mental disorders in primary and maternal health care contexts in **low resource** settings.



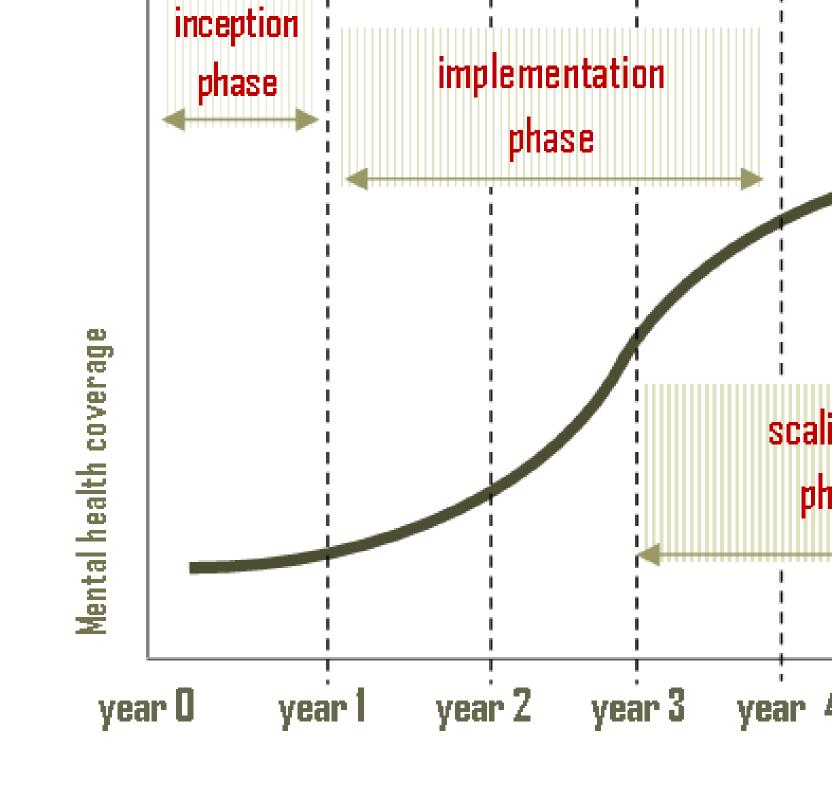


PRME's research will be conducted in the following overlapping stages over a 6 year period:

- the inception phase, during which PRIME will develop an integrated mental health care plan comprising packages of mental health care for delivery in primary health care and maternal health care.
- the implementation phase, which will evaluate the feasibility, acceptability and impact of the packages of care in primary health care and maternal health care.
- the scaling-up phase, when PRIME will evaluate the scaling up of these packages of care at the level of administrative health units

## programme for improving mental health care Evidence on scaling-up mental health services for development

The Goal: Scaling-up mental health services



### **Research District Information**

UGANDA





### SOUTH AFRICA

	DISTRICT	POPULATION	NO. OF PHC's	LITERACY RATE	NO. OF MENTAL Health specialists
ETHIOPIA	SODO	161,952	7	<b>49%</b>	2 psychiatric nurses
INDIA	<b>SEHORE</b> (Madhya Pradesh State)	1,311,008	17	<b>71%</b>	1 psychiatrist
NEPAL	CHITWAN	472,048	40	70%	5 psychiatrists 2 psychiatric nurses
SOUTH AFRICA	<b>KENNETH KAUNDA</b> (North West Prov)	632,790	58	88%	1 psychiatrist 1 psychiatric nurse
UGANDA	KAMULI	740,700	70	<b>62</b> %	1 psychiatric clinical officer

www.prime.uct.ac.za





A Small Grants Initiative, intended to support innovative research ideas from partners that are consistent with PRIME's objectives; Skills Development Training, such as facilitating the participation of PRIME researchers in short courses & promoting **postgraduate training** by mentoring doctoral and postdoctoral researchers

# Research Uptake

PRIME aims to develop **dissemination outputs** (including policy briefs, working papers, open-access peer-reviewed journal publications, audio-visual presentations), and communicate it through a range of vehicles. **Communication vehicles** include **global** and **national** advocacy initiatives such as World Mental Health Day (10 October annually), international (including community and local) media, social media and websites, conferences and local Community Advisory Boards (CABs).

### Partners



It includes research institutions and Ministries of Health in five developing countries in Asia and Africa (Ethiopia, India, Nepal, South Africa & Uganda), as well as the World Health Organization, the Centre for Global Mental Health (incorporating London School of Hygiene & Tropical Medicine and King's Health Partners, UK) and international NGOs such as **Basic Needs**, **Healthnet TPO** and **Sangath**.

Launched in May 2011, PRIME is a six year programme led by the **Centre for Public Mental Health** at the **University of Cape Town**, and supported by the UK government's **Department for International Development (DFID)**.

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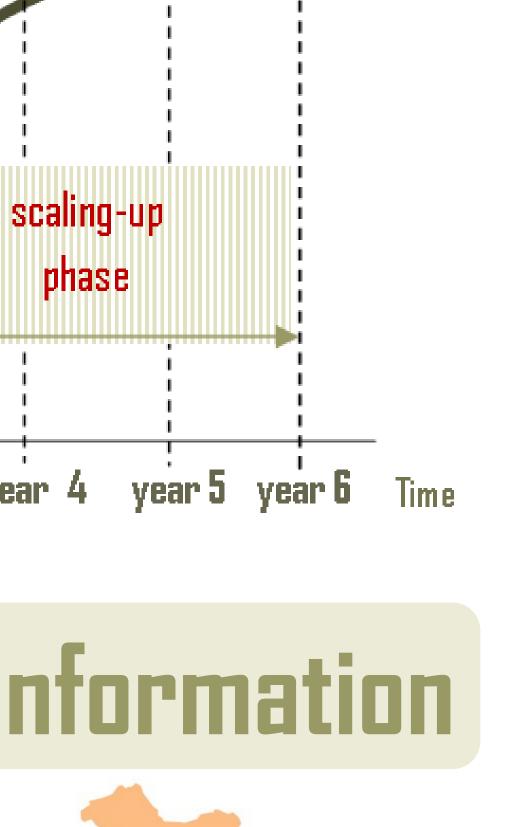


STELLENBOSC UNIVERSITY











Source: PRIME Situational Analysis, 2011

#### SUPPORTED BY





A major goal of **PRME** is to strengthen the capacity to generate, communicate and utilise mental health research in LMIC. PRIME has a number of capacity building opportunities



Through a Research Uptake Strategy, **PRME** is committed to enhancing the uptake of its research for policy-makers based on its **dissemination** and **communication** activities.



**PRME** is an international consortium of mental health **researchers** and **policy makers** who are committed to improving mental health in low resource settings.

