

Summary report on Knowledge, Attitude and Practices (KAP) Baseline Survey

About this summary

This briefing is for anyone working to ensure social behaviour change in the area of disability and mental health, such as Disabled People's Organisations, civil society organisations, researchers, development organisations and government agencies.

This briefing is a summary of a report written in December 2021 about a KAP survey which was carried out in October 2021 in 12 implementation districts across Ghana. The main purpose of the KAP survey was to establish a benchmark for the overall programme outcome indicator metric: "**percent of persons with positive attitudes and behaviours towards people with disabilities including persons with mental health conditions**" in the programme's SBC implementation districts. The full report is available from Ghana Somubi Dwumadie.

About Ghana Somubi Dwumadie

Ghana Somubi Dwumadie (Ghana Participation Programme) is a four-year disability programme with a specific focus on mental health. This programme is funded with UK aid from the UK government, and run by an Options-led consortium which consists of BasicNeeds-Ghana, King's College London, Sightsavers International and Tropical Health. It focuses on:

1. Promoting stronger policies and systems that respect the rights of people with disabilities, including people with mental health disabilities
2. Scaling up high quality and accessible mental health services
3. Reducing stigma and discrimination against people with disabilities, including mental health disabilities
4. Generating evidence to inform policy and practice on the effectiveness of disability and mental health programmes and interventions

About the KAP survey

In order to achieve the objective of the study, a mixed-method approach was used to reach out to a representative sample of community members, opinion leaders, people with disabilities and people with mental health conditions, as well as their families, representatives of Metropolitan, Municipal and District Assemblies, and media representatives. In total, 790 quantitative household surveys, six focus group discussions and 48 key informant interviews were conducted across 12 sampled districts where the Programme's Social Behaviour Change (SBC) grantees are implementing their projects.

Key findings

The findings reveal that, overall, 63% of households in the project implementation districts have positive attitudes and behaviours towards people with disabilities, including people with mental health conditions. Looking at these separately, positive attitudes and behaviour towards people with disabilities is higher (74%) compared to positive attitudes and behaviour towards people with mental health conditions (53%).

Knowledge

The survey revealed that knowledge regarding causes of disability, including causes of mental health conditions, is extremely limited among community members. Nearly 8 out of every 10 people who responded to the survey believed that disability and mental health conditions are caused by witchcraft or by a curse (77%). The qualitative findings revealed that respondents believed that for medication to be effective, the curse must be lifted by religious healers before any medication can be taken.

These beliefs influence the types of treatments pursued by families, who will go to prayer camps and traditional healers for treatments, rather than to healthcare providers. As seen in other studies, people without evidence-based knowledge about mental health issues are less likely to undertake preventive and early treatment interventions, and show more stigmatizing attitudes¹. This is because disability and mental health conditions are considered spiritual issues, instead of a medical condition that require treatment at health facilities, or social issues which require social solutions.

The findings also show that respondents have a relatively narrow perspective of what a disability is. Respondents focused on people with visible or severe physical or sensory impairments. 97% of respondents agreed that people who have total loss of vision or use a wheelchair have a disability, however, only 65% of respondents agreed that people with learning difficulties have a disability.

Attitudes

The study's findings on the attitude of respondents towards people with mental health conditions paint a negative picture. More than half of the respondents (53%) showed negative attitudes towards people with mental health conditions, and 44% of respondents showed negative attitudes towards people with disabilities. Over 7 out of 10 respondents have witnessed people with mental health issues being described with dehumanising or derogatory language in their lifetime. People with mental health conditions during the focus group discussions cited various instances where both community and family members discriminated and stigmatised against them.

In particular, negative views prevailed on the nature and causes of mental illness. While most respondents agreed that the best therapy for many people with mental illness is to be part of a community, they also felt that their presence might pose a risk and said they would not want to live nearby to people with mental health conditions. The study revealed widespread discrimination against persons with disabilities in

¹ See Wright, A., Jorm, A. F., Harris, M. G., & McGorry, P. D. (2007). What's in a name? Is accurate recognition and labelling of mental disorders by young people associated with better help-seeking and treatment preferences? *Social Psychiatry and Psychiatric Epidemiology*, 42, 244–250. doi: 10.1007/s00127-006-0156-x

communities. Some persons with disabilities reported that they have contemplated death by suicide due to the gravity of stigmatisation and discrimination they face in the family, community and larger society.

Practices

Respondents were asked about their intended or future behaviour towards people with disabilities, and towards people with mental health conditions. Intended behaviour towards people with disabilities was higher (82%) than that of persons with mental health conditions (60%). This can be explained by the fact that respondents said they felt more comfortable getting close to people with disabilities than with people with mental health conditions.

The findings of the study suggest that there is the need to deepen SBC efforts to translate the positive intended behaviour reported by communities, into actual attitudinal change and behaviour change.

Recommendations

Based on the findings of this study, the following recommendations are suggested for actors (including Ghana Somubi Dwumadie) working to ensure social behaviour change in the area of disability and mental health:

Deepen SBC campaigns by targeting faith-based organisations and traditional healers

Since the causes of disability and mental illness have been attributed to spiritual factors by most community members, the first point of call for treatment are prayer camps, and traditional healers such as Rukiya². There is, therefore, the need to support religious and faith-based leaders to increase their knowledge and change their attitude and perceptions on disability and mental health as an entry point for wider societal change in behaviour towards people with disabilities and mental health conditions.

Empower people with disabilities to assert their rights

People with disabilities need to understand their rights and the laws that protect their rights and interests. One of the ways to address stigmatisation and discrimination is for the victim to receive appropriate redress and justice after reporting an incident of abuse or discrimination. By empowering people with disabilities and mental health conditions on their rights under the laws of Ghana, and sensitising them on the legal redress options available to them, the rate of prosecution of offenders is likely to increase. Similarly, access to social services may improve as people with disabilities and people with mental health conditions will be more assertive in demanding their rights to basic social services.

² Rukiya is a term used to describe a center where a jinn (entity) is cast out among some Muslims

Employ multiple, sustained, strategies and tools in reaching out to the targeted audience

Positive attitudes and behaviour change takes time to be achieved. In view of this, there is the need for sustained SBC efforts using a variety of strategies and tools to engage all categories of people from social media engagement to the use of public address systems in transport stations, community and market centres as well as visits to places of worship such as churches and mosques.

Increase activities around learning disabilities to stimulate discussion around their issues to promote more inclusive planning and decision making

The findings of the study show that learning disability is among the least known forms of disability among respondents. This group are therefore more likely to face discrimination than some other forms of disability. It is therefore necessary to begin national discussions on this to consider strategies to support people with learning disabilities in Ghana.

Engage duty bearers to improve the availability and quality of support services to people with disabilities

The findings from the survey reveal limited support services both at the community and district levels for people with disabilities, including people with mental health conditions. Access to the District Assembly Common Fund disability fund component, earmarked for people with disabilities, still remains a challenge in the project districts, especially for people with mental health conditions. There is the need to actively support people with disabilities and people with mental health conditions to engage duty bearers to advocate for improved social services, by addressing barriers and bottlenecks in accessing these social services.



For the full report including sources for further information:

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