

AGAGO

By Arnest Tumwesige

In Labongo-dero village in Agago district, there is a family headed by a 13-year-old child, Bongomin (not his real name).

Left with the burden of taking care of his two siblings, aged five and eight years old, Bongomin, who is also HIV-positive, took up the task three years ago after the death of their mother.

The only hope for the trio would have been their father, who lives in Gere-gere village, Omot sub-county in Agago district, just about 9km away. However, since he had already married another woman by the time Bongomin's mother died, he has become a mere visitor to his children.

Bongomin told *New Vision* that he supports the family through tending people's gardens and the help from good Samaritans.

Because of living this way for the past three years, Bongomin slipped into a depression, according to Norah Aringo, a nurse at Lira-Palwo Health Centre III.

Aringo said due to the lack of psychosocial support, Bongomin became too stressed.

"Being born alone with the HIV virus, coupled with the responsibility of taking care of his siblings led to the depression."

During Aringo's routine visits to the family of minors, she not only provides medical care, but goes the extra mile by cleaning the house and sometimes washing their clothes.

At the facility where Aringo works, Bongomin is part of the 40 young people aged 10 to 24 who enrolled for mental health treatment with support from Basic Needs UK-Uganda (BNUU), a non-governmental organisation operating in Agago district. This adolescent group suffers from conditions ranging from psychosis, depression and epilepsy.

Bongomin is now studying at Kwon-kic Primary School, about 3km away, together with his siblings.

Francis Komakech, a carer, told *New Vision* that despite engaging the sub-county community development officer to hold Bongomin's father responsible, this effort has not yielded fruit, so the child is now studying thanks to the help of a good Samaritan.

Florence Adong, the BNUU organisation's programme officer, said since 2018, the support to persons with mental health illness and epilepsy project was rolled out, and 2,928 people have been treated. The most prevalent cases are epilepsy, depression and psychosis.

Adong explained that mental illness in Agago district is

Agago takes strides to address mental health

PHOTO BY ARNEST TUMWESIGE



Bongomin became the head of the family after their mother died three years ago



Muyomba

serve as clinicians," an article titled *Mental Health Care in Uganda* in the above mentioned medical journal reads in part.

Additionally, during the COVID-19 pandemic, the mental health units of most hospitals were converted to COVID-19 isolation units until May, 2022, which reduced the provision of mental healthcare services in this period.

HEALTH UNIT OVERWHELMED

Joshua Muyomba, a psychiatric officer and the focal point person of mental health at Gulu Regional Referral Hospital, said the facility manages an average of 300 to 500 patients every month.

He added that to date, the facility has registered 400 new cases from the eight districts of Acholi sub-region and one city. The leading age group registered is between 18 and 40 years of age, with the majority being due to substance abuse and alcohol use, which accounts for 50% of the total cases resulting in mental breakdown.

The officer, however, explained that the 50% of the total cases received are secondary to a behavioural response, adding that alcohol use and substance abuse is a deliberate decision that can be avoided.

"In some cases, people abuse substances because of the situations they are going through, while others do so to cope with stress and challenges. If we could avoid the irrational use of substances, the cases could be avoided. So, there's a need for community sensitisation," he noted.

"We also realise the majority of the causes are community-based. So, if people can have access to basic needs of life like shelter, food, health and education, it would create relief in their lives," Muyomba explained.

NEW SUBSTANCE ABUSE

In June last year, *New Vision* published a story titled "Drug Abuse on the Rise in Yumbe district - RDC" where it was reported that youth had ventured into smoking grey hair. Similar reports from local leaders have also emerged in Gulu city, where youth have started smoking dry paspalum as an alternative to marijuana, since it is very expensive.

Mathias Nampogo, the principal of the Butabika School of Psychiatric Clinical Officers, said big strides we being made in the promotion of awareness in the community.

Nampogo explained that the sector was still faced with low financing and limited infrastructure, right from the training to health facilities, drugs and low manpower development.

"There is still a lot to do. Since independence, the only training institution in East Africa and the first in Africa has only trained 83 psychiatrists in the country and 600 psychiatric clinical officers," he explained.

The officer also said management of mental illness must be managed by different officers, ranging from psychiatrists, psychiatry nurses, clinical officers and doctors, who are few. He attributed the low enrolment of the learners at the school to a mindset that the profession is not rewarding.

"We are getting a lot of applications, the ideal admission would be 100 in an academic year, but the institution admits only 60 in the psychiatric officers class," Nampogo explained.

MENTAL HEALTH POLICY

In Uganda, about 57% of the population is contributed to by children and adolescents, yet their mental health needs largely go unmet. This causes severe and often irreversible consequences for their emotional and psychological development.

The child and adolescent mental health policy guidelines of 2017 stipulate that many of the Ugandan children have experienced psychological trauma during war, abductions as child soldiers, physical or sexual abuse and bereavement, especially from AIDS, poverty and increasing disparities. Despite that, there is less utilisation of mental care services by this age group due the organisation of health services in the country not being sensitive to the needs of children.

"Children can only seek mental healthcare and treatment through their parents, yet parents may have different perceptions of the child's behaviour or illness," the policy says.

MASS SCREENING IN OFFING

According to the Parliament of Uganda website, Anita Among, the Speaker of Parliament, Parliament is taking the lead on mental health awareness."

Among encouraged all Members of Parliament to test for mental wellness as part of awareness.

"We need to start with ourselves to make sure that when we are legislating for the people, we are mentally stable - that is a priority. Before we talk about checking others, we shall first check ourselves," she said.

Among said since Parliament has appropriated money for mental health in the next budget, there should be a programme encouraging people to be screened for mental health. Tackling the problem from the roots with support from Network for Africa, the government of Canada and Foundation d'Harcourt, BNUU, has built the capacity of 497 frontline health workers and other actors to handle mental healthcare.

"We are providing treatment in health centres III and II and providing mental health services in 30 schools in Agago district, other than going to Gulu Regional Referral Hospital. This is in addition to forming 71 self-help groups and supporting 887 recovered clients with income-generating activities," Florence Adong, the BNUU programmes manager, said.

health problems or carers and supported by the NGO.

SLOW GOVT RESPONSE

The *Lancet Psychiatry* of October 2022 reveals that during the opening of mental health month in May last year, officials from the Ministry of Health stated that about 14 million of the 43.7 million people have a mental illness.

The approximate prevalence of about 32.0% was higher than in previous national estimates of 24.2%. The prevalence might be higher due to the pervasive

social stigma and taboos associated with accessing mental health services and the impact of the COVID-19 pandemic. The primary care system in Uganda is poorly resourced, inadequately funded and ill-equipped to address mental health concerns.

"There are only 53 psychiatrists in the country, which implies that there is approximately one psychiatrist per 1 million people. These psychiatrists are mostly located in urban centres and are employed as university lecturers and researchers, leaving few to