



Development of a Mental Health Handbook for Parents & Caregivers in Kenya

CENTER FOR GLOBAL HEALTH



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can live and function in their communities

Fact: Most people recover quickly with treatment, and

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ABSTRACT

Mental illness represents a significant disease burden worldwide and a leading cause of disability. In Kenya, mental illness affects one in four people in their lifetime. 1 Yet, a significant gap exists between the need, understanding of and access to mental health services in Kenya. In fact, fewer than 100 psychiatrists and even fewer child psychiatrists serve the entire country.²

The Mental Health Department at Moi Teaching and Referral Hospital cares for children and adults in and around Eldoret, Kenya, from inpatient to clinic to home visits. Their innumerable child and family encounters have identified a need for broader access to education to address this stigma and mental healthcare gap. To address this, we developed a culturally-minded Mental Health Handbook for parents and caregivers in Kenya, an educational resource describing common childhood mental illnesses. This has been translated and distributed in both English and Swahili.

BACKGROUND & OBJECTIVES

The global footprint of mental health disorders has not spared Kenya, where it accounts for 13% of the country's disease burden. The estimated prevalence of mental illness in Kenya is 10%, or 11.5 million people, most commonly depression, anxiety, and substance use disorders in both youth and adults.^{1,3-4} It accounts for 2,000 disability-adjusted life years per 100,000.² The COVID-19 pandemic has further emphasized the need for mental health interventions.⁵

Unfortunately, access to mental health services in Kenya poses a challenge for 75% of the population.⁶ The physical, financial and workforce limitations (with 0.19 mental healthcare workers per 100,000), are compounded by stigma, lack of education, and an association of mental illness with evil, resulting in social isolation of those afflicted^{2,6-8} Traditional healers also play a key role in diagnosis and treatment in rural communities.9

The objectives of this Child Behavioral and Mental Health Handbook are:

- (1) To improve access to evidence-based education about youth mental illness in language understood by most of the population
- (2) To reduce the stigma that impedes care of this vulnerable population in Kenya.

METHODS

A list of cultural and community beliefs about mental health and common diagnoses was compiled based on years of patient encounters by the Mental Health Department at Moi Teaching and Referral Hospital (MTRH) in Eldoret, Kenya, and a literature review conducted. A booklet was then created summarizing each diagnosis, its etiology, means of action, goals of treatment, and additional resources. This was translated and is available in Kenya's official language of English and Swahili, printed as both full booklets and individual page fact sheets to facilitate readability and relevance for recipients. The MTRH Mental Health Department is coordinating distribution across multiple sites.

	RE	ESULTS				
regional beliefs about mental illness, and diagnosis, etiology or contributing factor a list of general local resources for famil	Handbook is an 18-page print resource directed primary psychiatric presentations and diagnoss, actionable items for families to help their lovies. It is being distributed both as individual fachildren's Hospital (via the Sally Test team), Manual Resource.	oses. Each page focuse ved ones, goals of treat ct sheets (select pages	es on one mental healt ment, and where to fin shown below) and full	h topic, and includes basion d additional help and infor booklets, both in English	c facts describing mation. It also inc and Swahili, to pa	the cludes rents,
ampath astellas	Table of Contents	Depression Did you know?			Did you know?	
	Mental Illness: Myth or Fact? 4	Depression is a common	Depression affects over 200 million people of <i>all</i>	A substance is something that, when administered into one's	The younger children start using substances,	

Child Behavioral and Mental Health Handbook For Parents and Caregivers Katherine Soe, MD¹, Edith Kwobah, MBChB², and Florence Jaguga, MBChB² Indiana University School of Medicine, USA Teaching and Referral Hospital, Kenya Kitabu cha Mwenendo wa Mtoto na Afya ya Akili Kwa Wazazi na Walezi

Vatherine Soe, MD¹, Edith Kwobah, MBChB²,

	Depres		_ S	Substance Use Disorders			
Table of Contents	What is depression?	Did you know?	What is a	substance? Did you kno	ow?		
Mental Illness: Myth or Fact?	Depression is a common	Depression affects over 200 million people of all	A substance	e is something that, nistered into one's The younger start using su	hetanasa		
Substance Use and Addiction: Myth or Fact?5	illness characterized by low mood or irritability, decrease	1 tan 10 cause	System, car	uses changes in the substance ab	eir risk for		
Depression	pleasure, feeling worthless,	24 years old. (WHO, AACAP, 2020	Dellaves, Fx	camples of serious health			
Anxiety	sleep and appetite, and		(changaa)	tobacco u	in adult.		
Trauma	long-lasting and severe, and can lead to suicide.	garaction of the state of the s		mulants (khat), cription drugs.	12		
	What causes it?			V. J. Common Maria Maria	700		
Post-Traumatic Stress Disorder (PTSD)	Depression is due to a		This is a patt	What is substance use disorder/ addiction? This is a pattern of substance use that causes mental, physical and social harm to the person serior.			
Attention Deficit Hyperactivity Disorder (ADHD) 10	complex mix of environmental, biological,	7	example chil	dual in the person using For			
Autism spectrum disorder 11	psychological, and social factors. Significant adversity or changes in support can also contribute.		May experien	may experience discussion using substances			
Intellectual disability			suicidal thoug	ice difficulty with academic performa alth symptoms such as depression, thts and psychosis.	nce,		
Behavioral and conduct disturbance		VOU	What causes				
Bipolar disorder 14	You can offer support, liste	en, and let them know you ement. Ensure they are safe ughts of harming themselves	Substance ove	eruse results from a combination of			
Substance abuse	by asking if they have thou	us increase their	influences Thi	s include and genetic			
Resources	risk of self-harm). Millimiz	ticides Help them access	Coping mechan	influences. This includes peer pressure and unhealthy coping mechanisms. Many also have a history of trauma or substance use in their family.			
	treatment Take them to t	he hospital if endorsing	What can I do	their ramily.			
	thoughts of self-harm.		Substance uso	diacood			
Mental Illness: Myth or Fact?	Goals of treatment Treatment may include psychotherapy and/or medication. If severe, hospitalization may be required.		and it starts wit child know you	Substance use disorder prevention is key; it works; and it starts with you, parents and careging child know you are the			
Myth: Children cannot get mental illness.	medication. If severe, no	be able to function in the	getting help substances	Wasiwasi			
Fact: People of all ages and backgrounds can be	The goal of treatment is to be able to idirect in community, improve one's quality of life, maintain safety, and prevent suicide.		judgment. H all been sho	them find to a listen Without	Je, Unafahamu?		
affected by mental illness. Many manifest during childhood, with different symptoms than adults.		ation and help?	an Secti Silo(Je, wasiwasi ni nini? Wasiwasi ni hangaiko	Wasiwasi ni shida ya		
Myth: Mental illness is witchcraft, or due to demons	Where do I find information and Referral A mental health clinic or Moi Teaching and Referral Hospital (MTRH) Psychiatry Department (see page 17).		Goals of tre	unaoendelea, hofu, mawazo unaoendelea, hofu, mawazo kuwa pembeni",	kawaida ya afya ya akili ulimwenguni, na kwa		
Fact: A complex mix of biological, psychological, social,			Treatment air	ambayo watoto wote Hupatu	watotoCDC, 2019		
and environmental factors underlie mental illness. Like most other illnesses, anyone can be affected.	Intellectual Disability What is intellectual disability?		resistance skil This can reduc	ya kawaida (wageni, midilalii),			
Myth: Families with a mental health history are cursed			underachieven Earlier abstine	underachieven kuzuia shughuli za kawaida.			
Fact: Some people are at higher risk of specific	-	Did you know?		wanaweza kukasirika naraka, kuru			
illnesses due to their genetic makeup, but it can also occur in those with no family history of mental illness.	Intellectual disability (ID), also known as cognitive	Children with disabilities	Where do I fir A mental health	na hasira, kuwa na malalak yasiyo ya kimwili pekee, kupungua kwa nguvu, kulala na umakini.	Elian .		
, ,	disability, describes a	are disproportionately vulnerable to violence.	Hospital (MTRH)	:-hura na nini?	and the second s		
Myth: It is punishment for bad mothers or families. Fact: Anyone can be affected by mental illness, just as	development, self-care, and	exploitation and abuse		Sababu nyingi zinaweza kuchangia	wasiwasi, zikijumuisha ani au shuleni, maumbile		
any other illness. It is due to a combination of social,	communication. It is not a mental illness or disease.	-UNICEF, 2013		mafadhaiko ya kimazingira nyumba Matari huongezeka ikiwa wengine siwasi), magonjwa au taratibu f	katika familia wana ulani, dawa au uondoaji		
biological, and environmental factors.	It's not contagious, Children		th is a state of complete	ı dawa haramu.			
Myth: Mental illness is due to stress.	with ID may take longer to learn in school.		ical, mental and social peing, and not merely the	naweza Kufanya Nini?	ici cio kila siku, na utoe		
Fact: Stress alone does not cause mental illness. It may make it more difficult to cope with illness, and can			ce of disease or infirmity.	naweza kuranya kuma naweza kuuliza mtoto wako anal saada bila hukumu. Onyesha m saada bila hukumu. Unizako Uliza	. IVanyaswa na		
contribute to its onset if combined with other factors.	Many causes of ID have been identified, includin			saada bila hukumu. Onyesha mfano wa kudibut histo saada bila hukumu. Onyesha mfano wa kudibut histo saada bila hukumu. Onyesha mfano wa kudibut histo anajifunza kutoka kwako. Uliza kuhusu kunyanyaswa na enzake shuleni. Hakikisha wanajisikia salama. Watie mc enzake shuleni. Hakikisha wanajisikia salama wa ikiwa shughuli za k a uwasaidie kupata matibabu, haswa ikiwa shughuli za k			
Myth: Mental illness is incurable.	genetics (inherited in families), complications or infections during pregnancy or birth, and certain		orld Health Organization	a uwasaidie kupata matibabu, n iku zimeathirika.	asma mana		
Fact: With appropriate treatment and support, most people can fully recover from illness, though they may		, and certain		Lango va matibabu			
need ongoing treatment to minimize risk of recurrence. Seeking help is a sign of strength.	What can I do?		(Right) Swahili	Wasiwasi unaweza kuwa wa kaw	aida, lakini unapaswa i za kila siku. Lengo ni		
Myth: People with mental illness should be isolated	Learn about ID. Ensure your child attends school. Practice skills like communication, and praise them for applying skills. Be patient. Talk with your child's teachers/school to advocate for account.		translation of	kuweza kufanya kazi na kufanya vy	ema shuleni, na kushiriki		
from the community.				the page on katika shughuli za kila siku na hafla.			

the page on

("Wasiwasi")

"Anxiety"

teachers/school to advocate for accommodations, and

practice the same skills at home. Consider enrolling

them in a Special School. Talk to other parents whose

children have ID, and spend time in your community.

Goals of treatment

CONCLUSIONS

Mental health is a key component of well-being, with mental health disorders recognized as leading causes of morbidity and mortality worldwide. Unfortunately, these illnesses remain highly stigmatized. In Kenya, a need for greater educational resources and access to evidence-based information about mental illness underlies much of this stigma, which unduly influences access to and treatment of mental illness in this country.

The creation of this Child Behavioral and Mental Health Handbook for parents and caregivers in Kenya, by our team of pediatric mental health physicians, seeks to address this knowledge and resource gap. This handbook is culturally specific to this population, both in content and language, and harbors the potential to help decrease stigma and improve mental illness education and understanding in this region, one family at a time.

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