

# **Report 2016: mental health issues in Ethiopia**

Second visit of Ayder Referral Hospital in Mekelle in February 2016

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## **1. Latest developments of Mental Health Service in Ethiopia**

There's still a low level of awareness in Ethiopia about mental illness and there are many severe problems concerning the treatment, i.e. delays in seeking treatment and consequent prolonged duration of untreated mental disease. Patients are often in a severe and chronic state, and complications of syndroms can be seen, which are rare in Western countries nowadays. There's a lack of adequate treatment availability, because psychiatric care and psychological support is still extremely limited. Consequently the attention of the mental health professionals is focused on the severe and acute cases, like patients suffering from fluid psychotic symptoms. Mood disorders like depression, anxiety and posttraumatic stress disorders are widespread, but can't be treated sufficiently.

Things are changing step by step in a positive way. With the help of the psychiatry residency program in Ethiopia, the number of psychiatrist increases and is actually at about 70 psychiatrists in the whole country. There's also a growing number of graduated clinical psychologists working in Ethiopia according to the new Masters in Clinical Psychology programs.

Mental health care remains relatively centralized. In Addis Abeba the Amanuel Hospital is still the only psychiatric hospital in Ethiopia, but there are plans to open a second hospital in Addis Abeba soon, as Dr. Dawitt Assefa, the CEO of Amanuel Hospital told me. He kindly showed me the Amanuel Hospital during my stop-over in Addis Abeba and told me about the difficulties of his daily work with it's limited treatment possibilities.

As substance abuse is a serious problem with addiction to alcohol and khat as the mainly used drugs, there are also new possibilities of long time therapy. Long time therapy means a possibility to get therapy two to three months in a rehabilitation center. A substance rehabilitation center for male patients was opened in summer 2015 in Mekelle. In Addis Abeba, there's also a new center for homeless men with substance abuse, the "Shelter" had opened just the day I had been there with Dr. Dawitt Assefa and Dr. Ruth Tsigebrhan.

## **2. visit of Ayder Referral Hospital, February 2016**

From all mental health professionals, I had a warm welcome during my second visit in Mekelle. In a first meeting after arrival I met Dr. Gebrzgi Gidey (psychiatrist from Ayder Hospital), Kenfe Tefay and Tilhuan Belete (mental health professionals and lecturer at Mekelle University). We discussed the schedule of the next days. It was also very nice to meet Dr. Markos Tesfaye, a psychiatrist and professor from Gimma University.

Activities of the following days:

## **2.1. Psychotherapy Workshop for mental health care professionals, Saturday the 20<sup>th</sup> of February**

According to our goal to improve psychotherapeutic skills for all mental health care professionals in Ayder Referral Hospital we planned a workshop for all professionals. The subject in this year was the theory, diagnosis and therapy of the PTSD (Posttraumatic Stress Disorder) including an overview and demonstration of EMDR (Eye Movement Desensitization and Reprocessing), a first line treatment for posttraumatic stress syndroms. Kenfe Tesfay organized this workshop perfectly. We had been a group 24 participants consisting of psychiatrists, M.Sc. Mental Health and psychiatric nurses and worked from 9 a.m. to 5 p.m. As working material I prepared detailed handouts in Germany for the whole group consisting of my PPT, diagnostic tools, treatment guidelines, manuals and material for psychotherapeutic interventions (techniques for grounding/stabilization of agitated and dissociative patients, worksheets for cognitive behavior therapy and EMDR). In lack of electricity for a beamer in the room, we improvised and went through the presentation and materials only with the help of the handout. We trained some interventions during the workshop and had a lot of fun in doing some Salsa-training as dancing sometimes might be a very good grounding treatment. With the kind assistance of the psychiatrist Dr. Tsion Hailu, I demonstrated an EMDR process.



## 2.2. Psychiatric unit and OPD

Joining Dr. Mamuye Mussie in the OPD and during a visitation of the inpatient psychiatric unit, which consists of two corridors, one for male and one for female inpatients, I saw several clinical pictures. Nearly all of the patients showed severe psychotic states. A very impressive clinical picture showed a woman with symptoms of a culturebound syndrome, thinking that she is possessed by evil forces.



## 2.3. Workshop for Mental Health students

To support the lecturers of Mekelle University in the education of psychiatric nurses, we organized a workshop for the students. The main issue of the workshop was the training of grounding and stabilization techniques, which may be used as crisis intervention in the case of agitated patients or as a relaxation and mental stabilization methods. The nearly 20 students exercised the techniques in roleplays, so that each student was able to teach and train the technique.



## 2.4. Substance Rehabilitation Center

The Substance Rehabilitation Center was opened in July 2015 and is located in the periphery of Mekelle in a building of the Hope Community, a local NGO. The building has a terrain of 4 ha. Up to 30 detoxicated male patients may stay up to three months for psychosocial therapy to support the prevention of a relaps and a reintegration into society. The screening of patients for admission takes place at the OPD of the psychiatry unit of Ayder Hospital. After admission the patients have to sign a contract including the strict rules of the Center. Patients who are breaking a rule are discharged immediately. A structured daily schedule includes psychotherapeutical single and group sessions, spiritual counselling, relaxation training, self help group supported by the MDOC, sports, worktherapy. The professional teams consists of the manager Etsedingel Hadera, one psychiatrist, one clinical psychologist and 9 nurses, only one of them being a psychiatric nurse.

There are several things to improve in the Rehab Center. The stuff is underequipped having no computer, damaged furniture, limited possibilities for worktherapy and sports. Patients are at the moments only engaged in gardening. There are good possibilities for different worktherapies and sports on the huge areal, but the infrastructure and material is missing.

In the Rehab center I joined a group meeting of all patients and professionals including the cooks and the guards of the institution and some therapeutic groups. I did one relaxion group in English language teaching the patients a breathing technique for cooling down high emotional states, which was a funny experience. We laughed a lot. Dr Tsion helped by translating. The relaxation group is always done in a sitting position, which is a suboptimal position to get into a relaxed state of mind. Gymnastic mats would be very helpful to have to do a sufficient training.



## 3. Plans

All mental health professionals in Ayder Hospital are in need of more psychological and psychotherapeutic competences to improve their daily work.

Proposed activities for the next year are:

- the further improvement of crisis intervention skills and the training of mental stabilization techniques (workshop for mental health professionals and students)
- lecture about theory and therapy of mental health diseases, especially addiction (workshop for mental health professionals)

- live supervision
- case conference

Especially for the Rehab Center, a further hospitation will be useful and the organization of materials (e.g. gymnastic mats, tools for wood or metal work). The training of the nurses would also be a reasonable issue.

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