

The 2nd Annual Malawi Mental Health Research and Practice Development Conference

Date: Monday 19th and Tuesday 20th March 2012

Venue: College of Medicine, Blantyre, Malawi

Organised by:

The Department of Mental Health, College of Medicine, University of Malawi and the Scotland-Malawi Mental Health Education Project (SMMHEP)

Funded by: Scottish Government Malawi Development Fund grant

The conference was attended by 123 delegates - 77 from Malawi and 46 from Zambia, Zimbabwe, South Africa, Uganda, United Kingdom and United States, including an encouraging number of recently appointed trainee psychiatrists from Malawi (3), Zambia (3) and Zimbabwe (8).

Dr Charles Mwansamba (Principal Secretary, MOH) and Dr Beatrice Mwangomba (Program Manager of Non-Communicable Diseases & Mental Health) attended on behalf of the Ministry of Health.



Delegates came from a wide range of mental health services and training initiatives in Malawi including: St John of God College of Health Sciences, Mzuzu; the Ministry of Health Mental Hospital, Zomba; Chancellor College Department of Psychology; Kamuzu College of Nursing; Queen Elizabeth Central Hospital; the Department of Nursing and Midwifery, Mzuzu University; the Jesuit Refugee Service ; the Centre for

Youth Rehabilitation ; the Federation of Disability Organisations of Malawi (FEDOMA). The conference provided an opportunity to strengthen personal contacts with a growing contingent of international delegates including speakers and psychiatric trainees from the Department of Psychiatry, University of Zambia School of Medicine; the Departments of Psychiatry and Psychology, University of Zimbabwe; the Department of Psychology, Stellenbosch University; and the Department of Psychiatry and Mental Health, University of Cape Town. The meeting was addressed by the president of the Pan-African Network of People with Psychosocial Disabilities, Uganda and heard data from studies by Michigan State University, International Neurologic & Psychiatric Epidemiology Program working with Chikankata Health Services in Zambia. SMMHEP volunteers attending the meeting were from the Crichton Royal Hospital, Dumfries, Edinburgh University, Queen Margaret University and the Royal Edinburgh Hospital.

Delegates were welcomed by Dr Robert Stewart, SMMHEP trustee and Head of the Department of Mental Health in the College of Medicine, and Professor Dixie Maluwa-Banda, Director of Higher Education, Ministry of Education, Science and Technology gave the opening prayer. In his welcoming address Associate Professor Steve Kameza, Vice Principal of the College of Medicine stressed that COM was committed to strengthening undergraduate mental health teaching and strongly supported the recently established masters degree in psychiatry that has its first intake of students. He applauded the contributions of SMMHEP to psychiatric training by providing teachers and teaching resources.

The formal opening address was delivered by Dr Charles Mwansamba, Principal Secretary, Ministry of Health, Government of Malawi. He outlined the commitment of the Government in its National Policy Agenda to mental health training which is within two of the broad themes of the Malawi Growth and Development Strategy: social protection of the vulnerable and social development.

In four keynote addresses, internationally recognized speakers from South Africa, United Kingdom and the United States gave overviews of programmes of work in mental health in Southern Africa. Professor Crick Lund of Cape Town University, speaking on the theme: "Getting mental health on the policy agenda in sub-Saharan Africa: What evidence and strategies are needed?", reviewed current mental health policies in the continent and stressed that an essential starting point for each country is to have a clear national policy agenda as a framework for mental health policy development and implementation, founded on evidence provided by a demographic and epidemiological research base. His talk developed several of the themes raised by Dr Mwansamba in his opening address.

Professor Leslie Swartz in his talk "Global mental health through a disability lens: opportunities and pitfalls", delivered an inspiring call for changed attitudes towards people who live with mental illness and are thus often stigmatized. Progress in mental health care will come about through a recognition and acceptance of disability, in all its manifestations and societies must provide a supportive physical environment as well as appropriate medical interventions.

Professor Gretchen Birbeck described how rigorously conducted epidemiological and biological research can inform and direct intervention strategies in HIV in rural settings. She described an impressively large study of neuropsychiatric sequelae of

HIV run by Michigan State University at Mazabuka in Zambia with support from Chikankata hospital, Nakambala clinic and the University of Zambia department of Paediatrics and Child health. Overseas collaborators in her studies included Vanderbilt and Eastern Virginia Medical Schools and the Salvation Army, London. While much of our understanding of neurological problems in HIV is from research with US and European populations, this study in rural Zambia attempts to quantify the burden of psychiatric and neurological symptoms in a prospective cohort of people with HIV evaluated within one week of ARV initiation. The burden of psychiatric symptoms predicted early mortality. This and a parallel study presented in a poster "Behavioural problems following cerebral Malaria" highlighted the need for validated instruments to evaluate cognitive function and psychiatric symptoms in local languages in Southern African countries, a theme raised by several speakers at the meeting. Indeed a recognition that there are too few validated assessment instruments in local languages is a gap that future work by trainees might be able to fill.

The final key note address by Jonathan Chick from Edinburgh and St Margaret's Universities, Scotland, "Advances in the treatment of alcohol problems: relevance for Africa", provided a challenging up to date review of alcohol problems in Malawi placing emphasis on the importance of availability and drink promotion combined with cultural attitudes as predictors of problems. He illustrated and discussed the merits of education and various forms of direct political action in tackling this worldwide problem, drawing on data from recent research from Uganda South Africa and Zambia.

35 oral presentations and 17 posters were on the following themes:

- Community health care
- Psychosocial disability and human rights
- Forensic mental health
- Mental health in children and young adults
- HIV and mental health
- Trauma and its consequences
- Physical treatments in psychiatry

It was encouraging that several talks were given by MMed trainees from Malawi, Zambia and Zimbabwe and by Mental Health officers describing projects based at St John of God hospital, Zomba Mental Hospital Chancellors College, and Queen Elizabeth College.

Community health care

Following the keynote address by Professor Crick Lund, five presentations addressed ways of improving mental health care in the community. Dr Jerome Wright from University of York, UK, working in collaboration with Dr Felix Kauye and colleagues at Zomba mental hospital described a training programme aimed at increasing the mental health activity of Health Surveillance Assistants. Other talks provided data on rates of rehospitalisation to Zomba mental hospital of patients who

could not be adequately managed at home and surveyed the views of health care providers towards a team approach to patient management. Harris Chilale and colleagues from St John of God hospital provided interesting insights into the feasibility or otherwise of early intervention in psychosis based on their extensive clinical experience in Northern Malawi. Stine Braathen working with Professor Leslie Swartz at Stellenbosch University, described an ongoing study of factors influencing access to health care among Xhosa speaking people with psychosocial difficulties in a poor, rural community in the Eastern Cape Province, South Africa. Reasons for the limited use this community makes of available health services, may include poor awareness of mental illness, difficulties in conceptualising mental health and big contrasts between living conditions of users and health care providers.

Psychosocial disability and human rights

A session on psychiatry and human rights was opened by Robinah Alambuya Nakanwagi from Uganda, President of the Pan African Network of People with Psychosocial Disabilities. She spoke of building an African network of users of psychiatric services declaring that "The voice of those that are mentally ill is often ignored and the aim of the network is to promote inclusion by working through national organizations within the context of the UN convention of Rights of people with disabilities". This was followed by the launch of the Mental Health Users and Carers Association (Malawi) by its Chair, Orpheuse Chipata. This dynamic presentation received enthusiastic support from the audience who welcomed this timely initiative on mental health awareness in Malawi, a clear indication that this campaign is likely to attract wide public support. The launch of this organisation would not have come about without the support of SMMHEP. It will be an important voice in ensuring that the human rights of people with mental disorder are respected.

Forensic mental health

The issue of people with psychiatric illness admitted to prison was discussed in a series of presentations by mental health officers at St John of God College of health sciences, Muzuzu. Surveys of depression among inmates of Chichiri prison, mental disorders in detained juveniles in Bvumbwe prison and forensic knowledge among mental health workers were each the subject of well presented surveys.

Mental health in children and young adults

A series of talks from Queen Elizabeth Hospital, Blantyre, Chancellors College, Zomba and St John of God college of health science focussed on support for vulnerable children in community settings and health promotion in secondary schools in a session rounded off by a thoughtful overview of the challenges and prospects for mental health in higher education by Dr Dixie Banda, Director of Higher Education, Ministry of Education, Science and Technology, Malawi.

HIV and mental health

Following the keynote address of Dr Gretchen Birbeck, eight papers addressed several aspects of care for HIV positive individuals bringing together substantial expertise from HIV clinics in Malawi, Zambia, Zimbabwe and South Africa. Topics ranged from nurses perceptions of illness, clinical symptoms, the implementation of ARV treatment and the effectiveness of counseling and training of lay counselors. A theme touched on by several speakers in this session was the need to develop assessment tools validated in local languages.

The second afternoon of the meeting was devoted to parallel sessions on trauma and its consequences and physical treatments in psychiatry.

Trauma and its consequences

The trauma session was an opportunity to learn about projects in Malawi and Zimbabwe working with refugees, people affected by natural disasters and survivors of organized violence and torture. Presentations included estimates of prevalence and discussion of intervention strategies for PTSD among refugees at Dzaleka camp in Dowa District, Malawi, the earthquake victims of December 2009 and onwards in Ngerenge (Kilupula) area and people in Harare, Zimbabwe, exposed to organised violence and torture. In a talk "Collective, public, social, and shared memory" Protasia Gathendoh described a programme run by the Jesuit refugee service (UNHCR partner) designed to support adults and children who have fled from Ruanda, Burundi, Somalia, Democratic Republic of Congo, Ethiopia and Uganda and living in refugee camps in Malawi. The current thinking on applying cognitive behaviour theory in these settings was informatively explored.

Physical treatments in psychiatry

Dr Johan Leuvenink in a talk "Electroconvulsive Therapy – A Pan-African Survey" described progress in developing the Southern African Network for ECT (SANECT). The network was set up following the first annual Malawi Mental Health Research and Practice Development Conference in 2011 at a meeting in Zomba hosted by SMMHEP attended by delegates from other Southern African countries. The purpose of the network is to reduce isolation of ECT practitioners and facilitate modern, safe delivery of treatment. SANECT is now planning to engage with psychiatrists across Africa to assist in supporting best practice in the use of ECT.

Four presentations described audits of physical treatments of major mental illness in various settings in Malawi. Of particular note was the account by Chitsanzo Mafuta of the introduction of Clozapine as treatment for resistant schizophrenia in a patient at Zomba mental hospital. With adequate follow up and monitoring the use of clozapine, now one of the most widely used antipsychotics in the world, has the potential to substantially improve the lives of many patients with chronic psychoses in Malawi.

The conference was closed by Dr Chiwoza Bandawe, Associate Professor and Dean of students, College of Medicine.

Organisation:

Attendees from within Malawi (and the external keynote speakers) were fully funded by the grant. Excellent value for money was achieved by holding the conference at the COM campus and accommodating most delegates in the student halls of residence. This allowed us to invite a larger number of delegates.

Regional masterclasses for postgraduate trainees in psychiatry 21-23 March 2012

The conference was followed by 3 days of regional masterclasses for postgraduate trainees in psychiatry. These were attended by MMed trainees from Malawi (3), Zambia (4) and Zimbabwe (8) as well as members of the psychiatry Depts of COM and University of Zambia.

On day 1, Professor Jonathan Chick led a one-day workshop on alcohol problems, their prevention and management. He particularly focussed on policy level interventions to reduce alcohol misuse.

The following day, Dr Johan Leuvenink led a one day training on safe use of ECT including sessions on correct indications, consent procedures, side effect monitoring, and ethical issues.

On the Friday, Professor Douglas Blackwood taught on advances in the very important area of psychiatric genetics.

The masterclasses were very well received by all attendees. It is envisaged that regional masterclasses hosted on a rotational basis by Malawi, Zambia and Zimbabwe will become an important part of the training of psychiatrists in the region, and will reduce professional isolation and promote high standards of care. The initiative is supported by the respective departments and by the external partners supporting mental health training in each of the countries (Malawi – SMMHEP and Scottish Government, Zambia – Tropical Health Education Trust (THET), Zimbabwe – Improving Mental Health Education in Zimbabwe project (IMMHERZ) linked to Institute of Psychiatry, KCL).

Feedback on the organization and content of the meeting was provided by 50 delegates who rated the organization as follows: average (4%), good (40%), excellent (56%). The content of the meeting was rated: average (2%), Good (46%), excellent (52%).

These three comments sum up many of the views expressed:

“A very important conference for building a healthy body of research orientated health workers. Please continue organizing conferences” (a psychiatric nurse from a district hospital).

“Themes seem to be coming up relevant to our current challenges and may probably need to be maintained” (a clinical officer working in an outpatient clinic)

“The venue and time no problems. A very educative annual meeting and there is need for every psychiatric nurse to attend the meeting in future” (unsigned)

Media coverage

The conference was covered on TV by the Malawi Broadcasting Corporation who broadcast an interview with Rubinah Alambuya Nakanwagi, President of The Pan African Network of People with Psychosocial Disabilities

Press coverage included broadcasts by several radio stations and an interview with Dr Jennifer Ahrens on Star radio. The following articles in “The Nation”, the most widely circulated newspaper in Malawi highlighted some important mental health issues discussed at the conference.

Malawians urged to tackle mental problems

by Lawrence Maganga

Malawians have been urged to tackle mental health challenges and advocate for the rights of the infected and affected by the problem in the country.

Mental Health Users and Care Association (MEHUCA) board member, Orpheuse Chipata said this in Blantyre on the sidelines of the launch of the association, which has members from both public and private health institutions.

Chipata said it is high time the rights of the people suffering from mental illnesses were recognized, by ensuring they access quality medical care for them to be able to participate in development programmes that are

being implemented by government and its partners.

He challenged Malawians that drugs for mental illnesses are readily available in health facilities including Queen Elizabeth Central [QECH] and Zomba Mental Hospitals.

Chipata then advised guardians to be responsible by ensuring that mentally challenged people seek medical attention in good time, saying major hospitals like QECH are able to handle more than 100 mental cases daily.

“Sometimes sickness advances due to delays in seeking medical care in time, a practice which is bad. I would like to advise Malawians to start respecting the rights of mentally challenged citizens by ensuring that they are accorded the right treatment,” Chipata said.

The board member said the organization has lined up a number of activities in 2012 including awareness campaigns and formation of support groups that would work with communities in dealing with mental health problems across the country.

Chipata said the organization has already adopted programmes that are currently being implemented in neighbouring countries like Malawi to address mental challenges in Malawi.

He said the organization is currently being funded by the Scottish government through the Malawi Government Mental Health Project.

Chairperson for Pan African Psycho-social Disabilities, Rubinah Alambuya, said mental health programmes are being challenged by

stigma and discrimination, poverty and lack of basic social services.

Alambuya said it is high time governments and organizations in the Sub Saharan region start working together towards the recognition of the mentally challenged people for their survival and participation in development programmes.

“There are a number of issues that need to be addressed if mental health problems are to be dealt with. As an organization, we expect that governments work together to ensure that mentally challenged people seek medical attention,” Alambuya said.

The Pan African body is currently in countries like Tanzania, Kenya, Nigeria, Zambia, Ghana, Mozambique, Zimbabwe and Malawi, she added.

‘Drug shortage leads to increase in mental health challenges’

BOBBY KABANGO
STAFF WRITER

Shortage of drugs in public hospitals has led to an increase in the number of mental health patients in the country. Mental Health Users and Carers Association said on Monday.

Speaking during a two-day annual Malawi Mental Research and Practice Development Conference

at College of Medicine in Blantyre, chairperson of the association Orpheuse Chipata said their members are struggling to access drugs in health facilities.

“If we are talking of users, we mean people who have mental challenges whereas carers are the ones providing care to those with mental health challenges,” he said.

Chipata said the group,

which was recently launched, will advocate the rights of persons living with challenges such as mental health.

“Users face a lot of challenges and some are looked at by society as a source of entertainment. Some throw stones at them, others are even mistreated in prisons or hospitals.

“What we are saying is that we should recognise the users. We will ensure

that carers use their responsibility to take them to the hospitals,” said Chipata.

Principal Secretary in the Ministry of Health Dr Charles Mwanambo said out of 13 million people in the country, approximately 130 000 will have severe mental illness in the form of psychosis at some point in their life, whereas 1.3 million (10 percent) will suffer from depression and 10 percent

of children will have mental health problems.

Mwanambo said in 2002, the World Health Organisation (WHO) estimated that depression is the fourth leading cause of disability in Malawi coming after HIV and Aids, cataracts and malaria.

The conference brought together local and international experts on mental health and general health development. ■