

## **DEPRESSION: FACTS, MYTHS AND STIGMA IMPLICATIONS FOR MENTAL HEALTH IN AFRICA**

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More than 1.5 million cases of depression is reported annually in Nigeria, this is according to the College of Medicine, University of Ibadan, Nigeria. Globally, it is reported by the World Health Organisation that about 322 million people are suffering from depression and about 29.9 million that is about 9% are Africans.<sup>1</sup> Depression is a common mental disorder characterized with depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self esteem, disturbed sleep, appetite, poor concentration, and in severe cases, suicidal thoughts. Interestingly, depression in Africa is more prevalent than it's acknowledged. Although several studies report a much higher prevalence among different populations of the world. Anybody can suffer from depression, including young adults, elderly, healthy, ill or clinical patients, persons suffering social difficulties and adversity and patients with chronic illness like stroke, leprosy, epilepsy as well as people living with HIV/AIDS. However, risk factors of depression is not limited to the aforementioned category.

Depression may be caused by a combination of biological, psychological and social sources of distress including biochemistry, genetics, environmental factors or even individual personality. According to the World Health

Organisation , the burden of depression is 50% higher in females than in males. It is believed that being a female is a risk factor of depression, amongst others. Depression is of different types. Some of the common types include: Major Depressive Disorder(MDD), Postpartum Disorder(PPD), Persistent Depressive Disorder(PDD), Premenstrual Dysphoric Disorder(PMDD), Bipolar Disorder, Atypical Depression, Seasonal Affective Disorder (SAD) to mention a few. The most common type of depression is the MDD.<sup>2</sup> The various types of depression are characterised by similar and different symptoms as discussed in the foregoing paragraph.

Depression is one of the medical conditions that is viewed with levity and is raging the world like a wildfire at a prevalence rate of 3.9% with about 7 million Nigerians suffering from it.<sup>3</sup>

It is no fantasy that depression is real and becoming more prevalent in our society and Africa at large. Although many Nigerians and Africans are still oblivious of this condition, it's causes, symptoms and even treatment. Notwithstanding, there is a plethora of live cases of depression and testimonies of depression survivors. One of such is the testimony of a 15year old Puerto Rican girl who was diagnosed with MDD. Her most recent episodes were related to her parent's marital problem and academic and social

difficulties. She was treated with supportive psychotherapy and antidepressants.<sup>4</sup>

Also, there is a report of an Italian American widow named Peggy. She was of 52 years and had a history of chronic depression which flared during her husband's illness and ultimately death. Guilt was a driving factor of her depressive symptoms which lasted six months after his death. She was treated with psychodynamic therapy for about 2 years.<sup>5</sup> As earlier stated, age is not necessarily a factor for who is susceptible to depression. It may affect anyone of any age bracket and its duration is not determined either. It depends on the circumstances of each case. It is worthy of note that depression differs from usual mood swings and emotional responses to the vicissitudes of life. Depression is more serious than mood swings or behavioral changes or periods of sadness and grief.

Although the public may accept the medical nature of depression and mental health disorders and the need for treatment, many people still have a negative view of those with depression and mental illness. This is referred to as 'stigma'. Understanding this, and addressing this lingering issue will help eradicate it. No matter the magnitude of the stigma, it can be very harmful. Stigma, discrimination and cultural beliefs against depression and mental disorders can

discourage victims of depression from seeking help or mental health attention for fear of losing their jobs or livelihood or being treated differently. There are various identified types of stigma that may affect a person living with depression. They include public stigma, self stigma and institutional stigma. Self stigma refers to the negative attitude including internalized shame that people with depression or mental illness have about their own condition. Public stigma which is also the most common type of stigma associated with depression refers to the negative and discriminatory attitude the public has about depression or mental illness. Least of all, is institutional stigma which includes government policies that unintentionally or intentionally limit opportunities for people with depression or mental illness.<sup>6</sup>

Stigma associated with depression or mental illness may lead to delay in seeking treatment, reduced self esteem or hope, difficulties with social relationship, increased psychiatric symptoms and physical harassment or violence. The media has done more harm than good in mitigating this universal problem. Often, the media present people with depression or mental illness as violent. This is grossly inaccurate and wrong. For example, the popular Hollywood movie 'Joker', which portrays the lead character as a person with mental illness who becomes extremely violent.<sup>7</sup>This

affected the way the public viewed people with depression or mental disorders. However, stigma against depression can be eradicated. This can be achieved by mental awareness which will be fully discussed in the latter part of this essay. Also, communication with survivors of depression will help dispel the myths and stigma and encourage people to seek help and share their stories too. There are various platforms available globally for such purposes. The feeling of unity and love of fellow patients going through the same thing especially between people of the same age bracket will help deal with this stigma and in recovery process. Contact between such persons will go a long way to create a positive impact in the fight against stigmatization and discrimination against depression and mental disorders.

The effect of depression on mental health in Nigeria and Africa as a nation cannot be over emphasized. Despite the availability of evidence of cases of depression, patients usually don't get the help they need to manage this condition. This coupled with the unavailability of qualified mental health services and unawareness of mental health has not helped mitigate this raging illness which is becoming a pandemic. With this lackadaisical attitude to depression, it is no surprise that it is becoming more prevalent in Africa. It

is pertinent to address this condition to avert the impending implications on mental health in Africa.

Depression is believed to be a leading cause of disability around the world and contributes greatly to the global burden of disease making it a major health concern. The effect of depression may be long lasting or recurrent and can affect greatly a person's ability to function and live a productive life. It inhibits growth and impairs an individual's ability to carry out everyday tasks and responsibilities. In Nigeria precisely, 83% of people living with depression reported that their work related activities were moderately impaired and in South Africa, \$4,798 is the average lost income per depressed individual per year.<sup>8</sup> Thus, the more people become depressed , the more losses the economy incurs. In most cases, such person is just a shadow of theirself, merely alive but not living. A victim of depression is unable to go to work or school or function properly in all areas. Consequently, depression may lead to a reduction in man power, economic development and individual input. Depression is capable of affecting a person's well-being, physical health, economic productivity, have negative impact on the victim's child or children and even household functioning. It has also been reported that infants of depressed mothers have lower growth rates and development. Depression may become a

serious health condition if untreated and at its worst lead to suicide. Close to 800,000 people commit suicide annually and presently, suicide is the second leading cause of death in teenagers.<sup>9</sup> Depression is a common illness in both developed and developing countries of the world. In Kenya, Nigeria and South Africa precisely, triggers of mental illness like violent crimes, poverty, unemployment, broken homes and peer pressure is at critical high levels. The situation is nothing to write home about in poorer countries especially those that have experienced wars and conflicts like Sierra Leone and Liberia. A 2016 report by Sierra Leone Auditor General reveals that the hospitals lack trained psychiatrist and mental health officers. This is similar to Liberia where the hospitals are in depletable state.<sup>10</sup> The poor mental condition of African countries contribute to the poor health of the population and poor mental health services as an hindrance to efforts to achieve the UN's Millennium Development Goals. The burden of mental illness and disorder continues to grow with significant impacts on health and major social human rights and economic consequences in all countries of the world. It is important to address these challenges and recognize that depression is a real problem to avert the consequences sure to follow.

Depression is not a death sentence. It can be managed, controlled, prevented and possibly eradicated. This could be achieved by various means including using anti depressants, cognitive behaviour therapy (CBT), interpersonal psychotherapy (IPT), and counselling to mention a few. Firstly, mental health services and psychological therapy must become an integral part of our health services and be made universally accessible and available regardless of the status of the victim. It was reported in South Africa that inequality skewed the mental health sector and facilities in favour of only about 14% of the population of 53 million of which one-third were afflicted with mental disease. About 75% of mentally ill South Africans had no access to psychiatric care.<sup>11</sup> We must put an end to this kind of attitude. The health care workers must be ready to offer professional qualified help to all victims of depression regardless of their status, age or other factors. They must actively seek to diagnose patients suffering from depression and provide appropriate health care services and therapy. In order to achieve this, it is also important to train more health workers to offer the best and most capable help required in order to obtain maximum treatment. In 2012, after a report that an estimated 2.8 million Ghanaians out of a population of 25.9 million had mental health issues, Ghana took a step in



addressing the national mental health and passed the Mental Health Act to set out a mental illness policy becoming one of the few African countries to do so.<sup>12</sup> Other African countries can follow suit. The Nigerian government must prioritize mental health, encourage the training and funding of skilled mental health personnels to erode depression and other mental health disorders. In Africa, the present state of mental health care services and available mental health workers is grossly inadequate to meet the growing population's needs. This is a problem to be tackled immediately.

The problem of under funding of the mental health care system in many African countries is also a lingering problem. This coupled with the high poverty rate and financial difficulty poses an hindrance to eradicating depression in Africa. The government must provide fully funded mental health care centres to provide professional health care services and administer anti-depressants drugs under due supervision to victims of depression. These centres will be aimed at providing free therapy and counseling sessions too. This will ensure that due treatment is given to even the poorest victims.

Most importantly, mental health awareness is key. Many people suffering from depression do not even know what

they are battling with. Consequently, they might never speak up and receive proper attention and care. This was one advantage I had when I battled depression. I spoke out to my parent and got help and support that I needed.

Victims of depression must learn to speak out no matter the circumstances. Parental awareness is also vital in this fight against depression. It is imperative to enlighten parents and guardians to become more conscious of their children's welfare and mental health. This will help reduce occurrences of depression and help fight depression immediately noticed before it escalates to suicide. Mental health awareness amongst youths, adults, parents, elderly will help also to reduce stigma against depression drastically.

Conclusively, the stigma associated with depression and extended to depression survivors or victims must be checked. Victims will be willing to speak up and receive treatment if they will not be shunned or sidelined.

Depression is not terminal or a death sentence. There is absolutely no need to treat victims or survivors of depression as outcasts but rather they should be treated as the heroes that they are. Yes, heroes, because they fought and they won where many were lost to depression. I believe one day depression will be a thing of the past. It

may look colossal but together, we will get there. Africa will be greater. Africa will be better.

God bless Nigeria. God bless Africa.

"A HEALTHY AFRICAN MAKES A HEALTHY AFRICA"

-IHIMEKPEN MICHAEL.

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