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LEARNING FROM THE GLOBAL SOUTH

INSIGHTS FROM YOUNBELONG UGANDA, IN MENTAL HEALTH INNOVATIONS

INTRODUCTION

The use of the terms 'global north' and 'global south' are often used to view the global community within a framework enabling comparisons of indicators for areas such as economic development, political stability, industrialization, health and education. This framework, however, implicitly suggests that being the passive receiver of unidirectional development assistance and support from the wealthier and highly industrialized global north, the global south has little to reciprocate.

Resource limitations in the global south, however, necessitate the emergence of innovations and creative solutions in order to address the needs of its people. Therefore, we pose the question: 'Might the global north be engaged in dialogue about lessons that can be learned from the global south and reposition the perception of its role in its own development as one that is active and participatory'? Furthermore, might a true shift to a co-development framework portend towards an environment promoting global cohesion and improved global security?

An important example of how such a framework can be utilised is consideration of how best to address the burden of mental illness in Africa. Mental health services within most African countries operate mainly from a hospital-based institutional system delivered in asylum-like conditions; moreover, community-based mental health services to decompress the strain on mental health hospitals are severely limited. The mental health non-government organization, YouBelong Uganda, has developed a model for innovations to reverse this state of mental health care in Uganda, East Africa. This work should be of interest to the global north, particularly as the adequacy of mental health care appears severely strained across the global divide.

INNOVATIONS

1. YouBelong realizes that, in a resource-constrained setting, FAMILIES (defined as persons, within the family network of the family member with severe mental illness, who are willing and able to provide immediate shelter and care and to be active in the process of mental health recovery of their family member), must become ACTIVE AGENTS of mental health care and central to recovery plans.
2. The YouBelong community mental health program positions this FAMILY UNIT (person in recovery and carers) at THE CENTRE OF AN INTERLINKED MENTAL HEALTH SERVICE that includes: local primary health centres, religious organisations, schools and the police. An interlinked service is the first step towards integration of services. This program is about building up capacity within



A YouBelong social worker and a community mental health nurse explore income generation possibilities with "Betty" and her family during a family support session.

these institutions by using empowered families (i.e., building from the ground up), and their involvement in policy and program development, as the driver of change.

3. Insight from YouBelong Uganda's work includes the realization that a recovered person does not exist in isolation. A successful recovery plan always include a **NETWORK OF RELATIONSHIPS** that goes beyond support provided through one-to-one care and must always understand, take note of and respond to the dynamic of relationships (both good and bad) within the family and local community interactions.
4. In Uganda, and throughout Africa, there is still a sense of **SOLIDARITY**, particularly in rural and village communities. Individualism with its sense of aloneness, while spread throughout the world, is yet to overwhelm the sense of responsibility that family and local community hold for one another. YouBelong Uganda builds its empowerment plan for individuals and their families by leveraging the strength of this notion of community.
5. YouBelong Uganda views culture and sub-cultures as having critical impact recovery from acute mental illness. Not to accurately identity how culture underpins recovery from mental illness, minimizes the effectiveness of recovery plans.
6. YouBelong Uganda's 5-weeks **NEW PATHWAY OF CARE** is demonstrating high levels of success in assisting families to manage relapses in the family home and to avoid hospital readmissions. This major innovation requires further analysis and evaluation to ascertain its transferability to other similar settings.
7. The importance of the **DAILY LIIVED EXPERIENCE** of people recovering from severe mental illness is critical to the development and implementation of good quality mental health care. YouBelong Uganda endorses this perspective and is developing low-cost innovations to place people with lived experience of severe mental disorders at the heart of its new pathway of care.
8. **PEER SUPPORT** is taken to a high level in resource-constrained settings such as Uganda. Peers in recovery from severe mental illness who are given some training and supervision can provide long-term support and serve as a link between the person in recovery and the health system.
9. Besides mental health specialist nurses and psychiatrists, a mental health group called **PSYCHIATRIC CLINICAL OFFICERS (PCOs)** is playing a crucial role in developing community mental health care. This group of people are trained in a two-year program and are able to not only diagnose mental health disorders but also prescribe medication. While at an early stage of development, this group provides the opportunity for scaled up mental health care in the community where psychiatrists are a scarce resource. The development of intermediate roles such as PCOs, task sharing and task shifting are important ways to increase the scale of mental health services.
10. Stigma of severe mental illness in Uganda and throughout Africa is very deep. Yet, personal, face-to-face, engagement of families and local community by YouBelong Uganda social workers and mental health nurses is impacting positively on families. The use of personal stories and narratives by YouBelong Uganda team members is having a successful impact, and we are learning from this dynamic.



YouBelong community mental health worker engages with "Sam" and his carers during a family empowerment session.