# YOUNG PERSONS CONSULTATIVE GROUP (YCG)

**A Report on the June meeting**
**of *young persons recovering from mental illness and epilepsy***
**under the YCG**
**(Ages 18-25 years)**

At St. Martin Primary School, Mulago – Kampala, Uganda

Report compiled by
**Ntabazi Innocent and Nsangi Ethel**

*The group discussion was facilitated by*
*Edith Kebirungi (senior social worker) and Nsangi Ethel (social worker)*
*Photos by Philip Odoi*

**JUNE 2022**

**1.0 Introduction**

On 24/06/2022 a YCG meeting of young persons aged 18 to 25 years was held. The meeting was attended by 4 males and 6 females. The purpose of the meeting was to consult the group on their experiences with employment and income generation activities during their recovery from mental illness. 4 of the young persons were actively engaged in income generation, 4 had plans to engage soon, and 2 were attending skills training institutions.

The meeting attendees had diagnoses of Bipolar (3), Chronic Psychosis (2), Psychosis (2), Psychosis with HIV (1), Epilepsy (1), Substance induced psychosis (1).

**2.0 Discussion on income generating activity (IGA) and employment.**

Interest and skill were named as the key considerations in choosing an income generating activity. The group highlighted that the kind of jobs that can be done easily by young persons recovering from mental illness, and coping with medicines side effects, are jobs that require fewer working hours e.g., shift jobs, jobs that do not require high cognitive functioning e.g., having to memorize something and those that do not require a lot of physical energy.

Generally, they recognized the importance of their engagement in income generation to their recovery, as highlighted by Alex, "*If you have any kind of IGA you can engage in, it's very important to utilize the opportunity. There are many benefits in work mostly in fulfilling our needs, and our bodies gain strength which is very good."* 8 preferred self -employment while 2 preferred being employed to self-employment. Self-employment is preferred because stigma and ill treatment from employers can be avoided.

The group highlighted stigma from family and community as a significant factor that makes it difficult for them to find employment and to participate freely at work places.

One of the young persons who is employed mentioned, *"When I developed mental illness I changed my home address to another location where it is not known that I have mental illness, because when someone finds out that you have mental illness they can't offer you a job, they fear that signs of mental illness may manifest when you are at the work place".*

"Sam" (employed) also added that *"Keeping our information about our illness as a secret has helped us stay at work".*

The low level of knowledge of employers about mental illness/epilepsy and substance use has led to some losing their jobs. They highlighted that most employers do not know how to support them especially when they experience relapses or fits.

"Sarah" said, *"I once had a job working in a canteen making and selling snacks, but when I experienced a fit at the work place it created fear in my employers and they stopped trusting me hence I ended up losing the job."*

More to this, there is fear and uncertainty among the young persons and their families of what will happen to them while at the workplace or on their way to work. For instance, one of the youth persons diagnosed with epilepsy mentioned that whenever she is going to work she fears that she might get a fit and there will be no one to help her.

Societal perception of the ability and role of the young girls/women with mental illness affects their chances to engage in employment or income generation. There is a strong social and

cultural perceived that girls are meant to produce children and they are taken care of by their husbands, therefore there is no need to support them to start income generating activities.

"Cate" said *"With me my family refused to support me financially because I am a woman, and according to their understanding I will be taken up by a man and it will not benefit them."*

The side effects of medication also affect the young person's engagement in work.

Family and community support is paramount in establishing income generating activities and getting employment, as mentioned by "Rita".

*"My family can connect me to employment opportunities. Talking to employers about my illness and how I can be supported".*

## 3.0 Recommendations from the group meeting to help increase participation in income generation

The group suggested that:

1. Employers need to be made aware that people recovering from mental illness can be productive in the work place, so that proper work place support can be implemented.
2. Mental health services in local communities need to be established so that we can have medication to be more accessible.
3. Young persons recovering from mental illness should unite and come together to talk about issues that affect them.
4. The government should set up outreach clinics in different areas where we they get medication, and our leaders should speak up about the need for mental health services to be boosted amongst the population.

## Recommendations from the YouBelong Home team.

1. To ensure that the YouBelongHOME post discharge empowerment plan gives added focus to skill development for young people recovering from mental illness to start up income generating activities. Connection will be made to organizations that offer training in technical skills, and to organizations that provide financial capital to start up an IGA.
2. To conduct community and employer sensitization about mental health conditions and the workplace.
3. To build self-confidence, and a sense of purpose, gender equality, and agency among young girls recovering from mental illness, to be able to transcend cultural barriers that prevent their engagement in social and economic life, and to provide them with knowledge about their mental health, and to connect them with technical agencies providing income generating skills.