

A Deeper Look..... looking into the lives of people and projects that are making a difference in Malawi.....

“Mental health field has shown me that most healthcare workers focus on physical health and tend to ignore the mental health” **Thengo Kavinya** talks to **Michael Udedi**, Assistant Director of Clinical Services in the Ministry of Health

1. List your background.

I am currently the Assistant Director of Clinical Services responsible for mental health services in the Clinical Services Directorate (Ministry of Health) since April 2013.

I have worked as a general clinician from 1999 to 2006 at Machinga District Hospital and as a mental health clinician from 2006 to March 2013 at Zomba Mental Hospital before I was posted to the Non Communicable Diseases and Mental Health Unit under the Clinical Services Directorate. Academically, I hold a Diploma in Clinical Medicine obtained at Malawi College of Health Sciences in 1998, a Bachelor of Science in Clinical Medicine majoring in Mental Health and Clinical Psychiatry from St John of God College of Health Sciences and a Master of Philosophy in Public Mental Health obtained from Stellenbosch University (South Africa) in 2013. I

also hold several management qualifications including a Bachelor of Arts in Human Resources Management from University of Malawi-Chancellor College, a Postgraduate Diploma in Hospital Management and a Master of Business Administration in Health Care Management both from University of Applied Sciences – Neu Ulm (Germany).

I was born in 1976 in Lilongwe but I hail from Makunani Village, T/A Likoswe, Chiradzulu. I did my primary and secondary school in Blantyre at Kapeni Demonstration School and Blantyre Secondary School. I am married and blessed with three boys and one girl.

2. What prompted you to join this profession?

As a general clinician, I had interest in the field as I wanted to assist those experiencing mental health problems. This comes from a background that I had relatives who had been experiencing mental health problems but had a lot of challenges getting help. The turning point to join the profession came in 2004, when I lost a close relation through suicide as a result of depression. All this led me to do mental health and clinical psychiatry.

3. How do you plan your work?

I normally do coordination work thus setting up/coordinating systems for enhancing mental health care in the country. I supervise district mental health services, monitoring and

evaluation of service provision and also assist in drafting policies, protocols, standards and guidelines. As such, I plan my work on quarterly basis, based on my annual workplan which include supervision, coordination meetings, technical meetings and reviewing district reports.



4. Discuss your experiences as it relates to your field?

Mental health field has shown me that most healthcare workers focus on physical health and tend to ignore the mental health part however this is a crucial part as it has a bearing on physical health. One of the reason behind this trend is that the system is biased more towards physical health than mental health. On the other hand most patients with mental health problems do not normally present with psychological complaints at the clinics but rather somatic (physical) complaints which affects recognition of their problems unless they are at advanced clinical stage. On the same most

people do not seek psychological help for their mental health problem which is leading to increase in number of suicide and homicide cases in the country. There are several reasons for people not reaching out for assistance however some of them include inadequate mental health literacy and lack of community based mental health/psychological services.

Another experience is that of stigma, there is a lot of stigma towards patients with mental illness from the community and even from other health care workers. The stigma affects people from accessing mental health services and even recovery from the mental illness. This stigma is also experienced by mental health professionals from fellow general health care workers.

5. Describe your greatest achievement you are proud of?

Professionally the greatest achievement that I am proud of, is the initiation and facilitation of the national mental health policy review. The national mental health policy which is in place currently was developed in 2000 and has outlived its lifespan. The review process started in 2014 and is almost coming to an end soon. I am happy because the national mental health policy is a key to improving mental health services in Malawi as it outlines the necessary and significant strategies. I am also happy to be in a team which developed and launched the Non communicable Diseases Action Plan

which also includes the mental health action in 2013. My other achievement professionally was the facilitation of the inclusion of a chapter on psychiatric conditions in the Fifth Edition of Malawi Standard Treatment Guidelines. Academically, my greatest achievement was completing my MPhil program within the prescribed time and publishing the results in a reputable international journal within the same year of graduation.

6. What are your current research interests?

My research interest is mainly on public mental health with a focus on depression. I am interested in the area of depression in the community, primary health care setting and depression among the youth. My focus is on innovative intervention in relation to improving access to mental health care as well as improving quality of care. Currently the research I am involved in is aiming at providing a culturally appropriate psychotherapy for youth with depressive symptoms in sub-Saharan Africa (Malawi and Tanzania). I have interest in research as helps in decision making as well as in informing policies, strategies and evidence based interventions.

7. What are your views on the current standards of health service delivery in the country and what do you think should change in order to improve?

I think there has been a lot of improvement regarding the standards of health services delivery in the country. As a country we have good policies and good action plans as far as service delivery is concerned however implementation becomes a challenge because of inadequate resources. Similarly, mental health service delivery is facing a number of challenges such as inadequate human resources for

mental health and that most of general healthcare workers in primary and secondary care are not competent and confident in dealing with patients experiencing mental health problems. In addition mental health services are underdeveloped and majority of people have limited access to mental health services. In order to improve the standards of mental health services there is need to :

- Increase allocation of resources for mental health
- Improve the capacity of primary and secondary health care workers in mental health
- Integrate mental health services into primary and secondary care services
- Increase mental health literacy

8. Any last Words

I would like to encourage all health care workers to consider mental health as an integral part of general health and integrate mental health in routine care practice. It is important that health care workers appreciate the interaction between physical and mental health thus mental health influences susceptibility to, and recovery from, physical disease while on the other hand physical health influences susceptibility and recovery from mental disorders.