

# Sharing Ideas and Cooperation

*Members of the YALI Network are working in their communities to improve health awareness. Alport Ndebele is a YALI member who describes his work as a peer educator. He leads youth programs on reproductive health in communities in the Matabeleland region of Zimbabwe.*

I lead a team of youth leaders under the National AIDS Council of Zimbabwe. I operate in Bulawayo urban and rural districts, running programs and activities that have a sole goal of bringing innovation through involvement and volunteerism.

This is a community that is short on education, information and communication of all sorts. We want to try to cover that gap by bringing in social activities where we disseminate and discuss health information.

Alport Ndebele conducts a health  education program for a group of young people in Umguza District, Matabeleland North province, Zimbabwe.

We trained a total of 20 peer educators with communication and public speaking skills, and have boosted their esteem and confidence in doing so. They stand before their peers and educate each other on sensitive issues such as sexual reproductive health, a topic never discussed in some families. We have held events like sports galas and quiz competitions that have attracted over 200 youths per event in rural settings.

We now even have clubs formed at the village level that meet on a weekly basis and continue to share ideas and cooperation for the betterment of their community.

My membership in the YALI Network is helping me learn more about other related activities and policies relating to social development and improvement of my community. Most of all, I, myself, gain inspiration from resources being shared in this network.

Can the YALI Network create social exchange programs for youths to meet, share and exchange ideas with other youth leaders from different parts of the world with common goals? It is possible to move a mountain by shovelling pebbles off its base. I believe in humble beginnings, hence YALI might just be a space that will benefit my group.

*Alport Ndebele conducts health education programs in Zimbabwe, affiliated with a nongovernmental organization called Hope for a Child in Christ.*

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# African Community, Traditions Can Support Better Mental Health Treatment

*“Mental health is an issue that affects Africans daily. More distressing is the fact that there is so much stigma and superstition attached to it that it is an area that continues to hold the continent’s public health sector back.”- Ida Mboob, 2014 Mandela Washington Fellow, The Gambia*

Community resources to promote mental health and treat mental illness are scarce in Africa, as they are in most developing world countries. With professional resources limited, it’s important for individuals to recognize the possible signs of mental health issues in their friends and families, according to Mandela Washington 2014 Fellow Harriet Yayra Adzofu.

*“I tell families to look out for withdrawal from social activities that were previously enjoyed by the person. For example, loss of interest in school, work or sporting activities.”*

A psychiatric nurse at the Accra Psychiatric Hospital, Harriet works directly with people suffering from mental disorders and their relatives. She offers some practical advice to the YALI Network about how to spot the danger signs for mental illness in a family member:

- Change in sleep or eating habits.
- Complaints of unexplained physical ailments, such as fever, headache, abdominal discomfort, etc.
- Social isolation.
- Unusual fear, anxiety, irritability or restlessness.
- Complaints of low energy or fatigue.
- Talking to one’s self.
- Unrealistic beliefs about one’s social status or capabilities. For instance, a student suddenly says he is the president.
- Neglect of personal hygiene.
- Long periods of over excitement or sadness.
- Thoughts of death or suicide.
- Complaints of hearing voices or seeing visions.
- Substance abuse.
- Confusion or lack of concentration.

Harriet also works in the community in mental illness prevention, treatment and rehabilitation. She also works to to empower people in her community to live healthy lifestyles.

Besides the support and understanding that caring family members can provide, other social qualities and communal traditions inherent to African cultures are potential resources to help people with mental health problems, according to a U.S. psychologist.

“Natural supports exist for a person through community or faith-based organizations, and the notion of shared responsibility for a person,” said Paul Sachs. “African communities, particularly in smaller towns or villages ... are more attuned to this.”

Sachs, a clinical psychologist, is with NHS Human Services of Philadelphia, Pennsylvania, an organization providing therapeutic care to patients with a variety of special needs. After a 2012 trip to Africa, he was a consultant in the establishment of a Ghanaian nongovernmental organization dedicated to addressing mental health issues. (See the For All Africa Foundation below.)

African storytelling traditions can be another important asset in addressing mental health issues, Sachs said. People who have experienced mental health disorders and treatment “have amazing stories to tell. Storytelling is a way that they can give their chaotic experiences greater coherence.”

The United States and other developed countries have progressed in their understanding and sensitivity about mental health disorders, a process also underway in Africa, Sachs says.

Nongovernmental organizations and volunteer counseling services are being organized in many countries. A brief guide to these services follows.

### [For All Africa Foundation](#)

Africa Mental Health Foundation

International Association for Suicide Prevention

Befrienders Worldwide (volunteer action to prevent suicide)

Suicide.org

LifeLine South Africa

Important Facts About Mental Health

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## **Facts About Mental Health**

1. Mental health problems are common, estimated to affect as many as 1 in 4 people worldwide at some point in life.
2. Mental health problems are not an individual weakness or failure. Biological factors or life experiences can give rise to a disorder. Genetics, physical illness, injury, brain chemistry, trauma or a history of abuse can all be causal factors.
3. Mental illness is a disease, centered in the brain, involving cognition, emotion and a person’s spiritual and physical being. Like other diseases, mental disorders can be treated, managed and even cured.
4. Mental illness is not a curse imposed by a higher power. It is not a form of possession by a malign spirit.

5. Abnormal thoughts, perceptions, emotions, behavior and relationships are among the general symptoms an individual suffers from with a mental illness.
6. Depression, bipolar affective disorder, schizophrenia and other psychoses, dementia, intellectual disabilities and developmental disorders, including autism, are all different forms of mental illness.
7. Mental and physical health are linked. Mental disorders are important risk factors for other diseases and injuries. Mental disorders can increase the risk of other diseases such as HIV, cardiovascular disease and diabetes.
8. Mental illness affects more than the individual. Family, friends, neighbors and associates can all be affected. Conversely, they can also be sources of support.
9. Medications have been a great help in the treatment of mental illness. Mentally ill people can learn new ways of managing their emotions to resume productive lives.
10. Health care, social services and community support are critical to treatment and management of a mental illness. Friends and loved ones are important in helping an individual manage a mental illness.

Sources: <http://www.mentalhealth.gov/basics/myths-facts/>

[http://www.who.int/features/factfiles/mental\\_health/en/](http://www.who.int/features/factfiles/mental_health/en/)

<http://www.who.int/mediacentre/factsheets/fs396/en/>

<http://www.nimh.nih.gov/health/index.shtml>

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## Promoting Good Health Through Community Education

*“People do learn how to watch their diets.” — YALI Network member Ebelenna Anekwe*

YALI Network member Ebelenna Anekwe is a volunteer peer educator who inspires neighbors in his Nigerian community to think more about how they can improve their health.

Ebelenna Anekwe checks a neighbor's  blood pressure.

He does that by teaching them about nutrition levels in the food they eat. He encourages them to get regular medical check-ups — including blood pressure and diabetes screenings — and to take their medicines and other treatments as prescribed. Since 2013, he has reached 100 people ranging from

youth to the elderly.

Anekwe, 25, is a physical therapy student at the University of Maiduguri. Since 2009 he has volunteered with the nonprofit International Center for Advocacy on Right to Health, also known as Alliance Rights Nigeria. He began his work there by taking patients' vital signs, which indicate general physical health, give clues to possible diseases and show progress toward recovery. "My family works with me to make great change in our community," he says.

"I believe peoples' attitudes have changed" about maintaining their health, he said. "People do learn how to watch their diets."

Anekwe is helping to spread a message about cardiovascular disease that is sometimes overlooked in Africa, where infectious disease is frequently portrayed as the most immediate health threat. According to the U.S. Centers for Disease Control and Prevention, more people in the world die of heart disease and stroke than from any other cause. Heart disease and stroke risk factors include unhealthy diet and physical inactivity. Diabetes is a chronic disease that occurs when the pancreas does not produce enough insulin or when the body cannot use the insulin it produces. Diabetes increases the risk of heart disease and stroke.

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## **"Get Involved. Make a Difference!"**

Screening for HIV, infection prevention and community involvement are among the best ways to contain and control the virus that causes AIDS. That's the message a group of Mandela Washington Fellows heard earlier this year from an AIDS prevention group in the state of Delaware.

"Get Involved. Make a Difference!" is the call to action AIDS Delaware uses to bring volunteers into its organization to encourage people to get a free and confidential test for HIV, the virus that causes AIDS.

These YALI Network members met with  the nonprofit group AIDS Delaware to learn how the group provides services with the help of volunteers.

AIDS Delaware is one of many community groups nationwide that welcomed a group of Mandela Washington Fellows earlier this year. They were "eager to learn about how we do things," executive director John Gardner explained.

Since shortly after its founding in 1984 by citizens concerned about the toll that a newly discovered

disease was taking on their state, AIDS Delaware has attracted a committed group of volunteers to spread the prevention message. The nonprofit group makes it easy to volunteer by offering a simple online sign-up form.

Client confidentiality is a priority of AIDS Delaware, Gardner told the young African leaders. Confidentiality of personal medical information is protected by a U.S. law that also covers caregivers and people who pay for care.

AIDS Delaware encourages people of every race, sexuality and age to learn about how to prevent the spread of HIV. It helps people who are infected understand why they need to stay on a prescribed medication regime. And it attempts to get in contact with people who may not be getting the care they need so that they can gain access to care, Gardner said.

AIDS Delaware's outreach activities include Do the Right Thing 4 Life, educational sessions that use everyday language and are held at community gathering places like beauty salons and barber shops. Through its Peers Achieving Change Together project, teens use dance, music and poetry pieces they have created to emphasize that they need to take "responsibility for improving their own lives and the lives of those around them."

AIDS Delaware receives financial support from the U.S. government and the state of Delaware and from individual, corporate and foundation donations. Those funds support client services like assistance for housing, food and transportation, and for counseling. Its annual AIDS Walk is a community highlight that brings in donations from people who back volunteers who walk through their neighborhoods to raise awareness of HIV prevention through testing.

"Take the first step today," AIDS Delaware encourages.

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## **Vaccines: 10 Things You Need to Know**

- Vaccines effectively, efficiently and safely prevent disease.
- Widespread, consistent administration of vaccines has reduced diseases like diphtheria, mumps and measles as much as 99 percent.
- Full-scale distribution of the smallpox vaccine eradicated the disease in 1980.  Vaccines have dramatically reduced the occurrence of diseases that killed millions of young children in the past.
- The occurrence of polio has declined 99 percent since a global vaccination campaign began in 1988.
- An estimated 350,000 annual polio cases appeared worldwide in the 1980s. 2013 saw 416 cases. As 2014 ends, only 316 polio cases have appeared worldwide.

- Vaccines remove a major barrier to human development by helping people stay healthy. Immunized children are more likely to thrive, attend school and grow up to become healthy, productive adults.
- Vaccination protects a child's cognitive skills, physical strength and school performance. Greater developmental success will contribute to an individual's long-term productivity.
- Vaccines save time and money for health systems and families as the burdens of illness and long-term disability are reduced.
- Parents regain productive time and potential earnings when they are not caring for children stricken with infectious diseases.
- Families are relieved of the trials and expenses of caring for children with long-term disabilities that may result from infectious diseases.

Sources: [www.cdc.gov](http://www.cdc.gov); [www.gavi.org](http://www.gavi.org); [www.polioeradication.org](http://www.polioeradication.org); [www.unicef.org](http://www.unicef.org); [www.who.int](http://www.who.int);

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