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Barriers in Accessing Child Mental Health Care Services in Ethiopia

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Abstract

Background: Globally, mental illness is one of the foremost causes of disabilities and many children experience various mental disorders. On the other vein, few of these children receiving mental health care services in most countries. This journal aimed at realizes barriers in accessing child mental health care services in Ethiopia.

Methods: A systematic analysis was conducted to analyze significant research journals since 2005 and searching terms were access, children, mental health, care services, and barriers. Google Scholar, Global Health, PubMed, Summon, WHO, PsychInfo, and NIH data sources were used to collect data and the collected data were analyzed in a systematic manner.

Results: Lack of mental health policy and strategies, limited professionals, stigma and discrimination, financial limitation, cultural beliefs towards mental health problems and research gaps were identified as barriers in accessing child mental health care services in Ethiopia.

Conclusion: A lot of children today are not in receipt of the mental health care services in Ethiopia. Those children who have a mental illness are facing larger risks even in their lifespan and socio-economic problems of the country. Due to lack of research, the prevalence rate and symptoms of mental illness and diagnoses in Ethiopia are unknown and difficult to categorize.

Keywords: Barriers; Children; Mental health; Care

Introduction

Today, numerous children are suffering from untreated mental illness in the world. Though, the existing study on barriers to children mental health care services does not deal with the obstacles children face in accessing the treatment. While unmet mental health needs of the children affecting their current life and can be serious problems later in life, such as crime, drug/substance abuse, depression, risky behaviors, problems for the community, and etc. [1]. Around 70% of adolescences are in the jail and under the justice systems that have mental health problems. High numbers of adolescences with mental disorders in the jail and justice system shows an increased connection between danger to commit a crime and unmet mental health treatment. Besides, of the adolescences who commit suicide, 90% had fundamental mental health problems [1]. On the other hand, numerous deaths may have been prevented if only these adolescences had received the required mental health care. An overwhelming occurrence of mental health problems and unmet mental health demand has a great opportunity to mental health professionals to work seriously in the prevention of childhood mental health problems before it becomes harsher in future.

Furthermore, child mental health care is receiving a global attention and it has a power in creating good interactions and determined by their sense of control in dealing with their circumstances. A child who has a healthy mind is able to comprehend his or her own abilities, deal with the stress of daily life, work effectively, and add values to the society [2]. On the other vein, the lack of modern child mental health care services has significant implications considering that child psychopathology may be a risk factor for future problems such as academic difficulties, health problems, substance abuse, and psychopathology. In Ethiopia, mental health situations of children are more multifaceted and complex. Besides, numerous studies indicated that in many regions of the country, children mental health care services is the most neglected health program.

Thus, this article aimed to discover the current barriers to accessing child mental health care services in Ethiopia. Recognizing the current gaps may help to provide the Government, psychiatrists, researchers, social workers, and other stakeholders with the essential awareness to reduce the barriers which children face in accessing the required mental health care services.

Materials and Methods

The main objective of the article was to find out the current barriers to accessing child mental health care services in Ethiopia. A systematic analysis was conducted to analyze significant research journals since 2000 and searching terms were access to child mental health, care services, and barriers. Google Scholar, Global Health, PubMed, Summon, WHO, PsychInfo, and NIH data sources were used to collect relevant data. The collected data were analyzed in a systematic manner.

Results

After analyzing different studies results on mental health care service barriers include lack of mental health policy and strategies, limited professionals and financial resources, stigma, and discrimination towards mental health problems, and poor care management decision making and implementation and research related.

Among the barriers the issue of mental health policy and strategies is fundamental to realize basic standards provided to children, to fight against risky traditional practices and create pleasant services where among other services children get the required support. Most of the studies were indicated that none has indicated as a children mental health policy in the Ethiopian context. However, some of the studies

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were described that there is a document, which is an outline to provide a psychosocial care and support for the children. However, the content of the document was focused on life skill training, counseling and guidance, and academic achievements. A majority of the studies so far indicate that lack of policy or its failure were the major hindrance to lack of mental health care services. Furthermore, as indicated by Appunni. Ethiopia does not have any rigorous national mental health policy, and programs [3].

In addition, there is a scarcity of empirical research on the current situations of mental health care service access and barriers. This shows that there is a basic problem with the current system of mental health care distribution to the children. Children mental health care service is one of the most neglected health programs in the country regarding policy planning, skilled professionals, and basic resources. However, there is a high prevalence rate of child mental illness in the country. Due to this reason, children with mental disorders are at a greater risk like dropping out of school, having difficulty in developing peer relationships, becoming discipline problems, and exhibiting a higher incidence of family dysfunction and a highly stigmatized phenomenon [4,5]. As a result, the children are exposed to different psychosocial problems and mental disorders [6].

Furthermore, the condition of child mental health problems and treatment practices in Ethiopia is unidentified. Even though few studies in the country have tried to discover at child mental problems, but still it is difficult to identify the prevalence rate and symptoms of mental illness and diagnoses in the country. Besides, child depression was recognized in Ethiopia, although with lower rates than in the studies [7]. Some literature indicated that child mental health problems in Ethiopia showed high admissions to hospitals and private clinics particular in Addis Ababa. Meanwhile, Menelik found that the Ethiopian health care system remains to be known with the more modern and stronger rating scales in introducing child mental assessment in primary care systems [8].

Moreover, a lack of access to mental health care services was identified as a barrier by caregivers in the service providing organizations. The organizations counseled other organizations with a child with mental illness to be practical and constant in arranging holistic services and working with multiple stakeholders in order to provide comprehensive services. On the other hand, studies found that financial and professional barriers to mental health services in the country. Scarce budget issues as one of the most common barriers and limited skilled professionals as another serious barrier to provide the required services. Ciccone MM et al. found that the support of dedicated care management decision making, incorporate some guidelines and recommendations that is implemented for each condition aimed to improve clients health outcomes and promote appropriate resource utilization [9].

Moreover, Desalegn revealed that such barriers in provision of suboptimal and worse quality of care by clinicians to patients, for instance lack of diagnosis, lack of adequate human and material and financial resources, poor monitoring, and lack of continuity of care of health status of people with mental illnesses as well as poor medication for behavioral problems and substance abuse of the children [10]. Furthermore, in Ethiopia, the public stigma against people with mental illness exposed to low self-esteem and discrimination. The existed stigma towards mental illness and its treatment found long before the care, and on many occasions, available treatment has not helped to improve stigma towards mental health problems. Likewise, mental illness treatment gaps have large effects which have an extra load to those with mental illness [11]. Most of the people believed that keeping individuals with mental illness behind locked doors is the best way of managing. The majority of Ethiopian community links the causes of mental illness to the supernatural phenomenon and its treatment practices associated with religions and traditional medicines (Table 1).

Discussion

Besides, in Ethiopia, the traditional healings and religious practices have been identified as effective mental health care in the most regions of the country. Traditionally, most Ethiopian believed that mental illness can be originated by the awful spirits, horrible wishes, evil-minded people, ill will, the evil eye and the antagonistic feelings and preferred traditional healings. According to Holm-Hansen, cultural beliefs about mental illness could influence the service providers and receivers and ways to treat it [12-14]. Thus, further studies are suggested to promote the mental health literacy among the society and to assess the accurate and current publics' beliefs and attitudes of mental disorders. Lastly, cooperation between public and government sectors should be encouraged to develop strategies for reducing the stigma and negative beliefs associated with mental disorders.

However, the incidence of mental illness is higher among the children. In addition, those children are experienced numerous depression, suicidal thoughts, hazards, vulnerabilities, poor self-esteem and anxiety that lead to self-pity, and fear of future. As the result, the children exposed to different risky behaviors and mental health problems as well as suicidal practices. Therefore, it needs a serious attention at the level of legislation, policy formulation, an empirical research and mental health education, resource allocation, educating skilled human resources, and reforming the overall mental health care system [15,16].

Types of the barriers	Articles	Barriers
Mental health policy and programs related	Appunni [3]	Lack of policy or its failure were the major hindrance to lack of mental health care service direction.
Skilled professionals and basic resources related	Ashenafi et al. [7] Booysen [4] Desalegn [10] Getinet [13]	Lack of skilled professionals and basic resources.
Care management decision making, and implementation	Desalegn [10] Ciccone MM et al. [9]	Poor care management decision making and implementation.
Cultural beliefs and traditional medicines related	Reta et al. [11] Kahsay [14] Mihiret et al. [15]	Most Ethiopian believed that mental illness can be caused by the bad spirits, horrible wishes, evil-minded people, the evil eye, and preferred traditional healing practices.
Research related	Fekadu et al. [16] Menelik [8]	Due to lack of research, the prevalence rate and symptoms of mental illness and diagnoses in Ethiopia are unknown and difficult to identify.

Table 1: Types of the barriers and main results.

Conclusion

This article aimed at realizes barriers in accessing child mental health care services in Ethiopia. Mental health care service barriers include lack of mental health policy and strategies, limited professionals and financial resources, stigma, and discrimination towards mental health problems and its treatment. As a result, a lot of children today are not in receipt of the mental health care services in Ethiopia. Especially, those children who have a mental illness are facing larger risks even in their lifespan and socio-economic problems of the country. In addition, there are a lot of stigmas attached to various beliefs towards mental disorders, and mentally ill people are living in fear of stigmatization and low seeking of the modern mental health treatment in order to cope with the illness. It is highly necessary to bring awareness to people and orient them to follow modern mental health services. It is also necessary to find out the merits and demerits of these traditional and folk methods, and faith healing practices through different research, and to share its real practices from common people to educationalists, policy planners, and policy analysts to formulate the required programs and strategies.

Acknowledgement

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