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FACTORS ASSOCIATED WITH THE PREVALENCE OF MENTAL ILLNESS AMONG PEOPLE LIVING WITH HIV/AIDS AT MULAGO NATIONAL REFERRAL HOSPITAL, KAMPALA, UGANDA

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ABSTRACT

Background: Mental illness has been discovered as one of the challenges faced by people living with HIV in Uganda.

Objective: The objective of the study was to determine the factors associated with the prevalence of mental illness among people living with HIV/AIDS at Mulago teaching hospital, Kampala.

Method: Cross-sectional study design was used in the study with 186 sample size, structured questionnaires were administered. Purposive and convenience sampling techniques were used. Data were analyzed using SPSS. Descriptive, bi-variate and multivariate analyses were done.

Results: The study found out that mental illness occurred in 41% of the HIV patient which indicates 4 out of every 10 people living with HIV/AIDS suffer from Mental illness. The associated factors were: Sex; Age, education status; Income, employment status. Segregation, availability of health facilities, community leader's responsiveness, Perception of the entire community about HIV/AIDS, availability of drugs at the health facilities, health facilities well organized and waiting time at the health facilities.

Conclusion: The prevalence of mental illness among HIV/AIDS patients is moderately high, socio-demographic factors, institutional factors and community factors were found to be associated with mental illness among HIV/AIDS patients.

Keywords: HIV/AIDS, Mental illness, Socio-demographic factors and Prevalence

INTRODUCTION

The World Health Organization (WHO) estimates that 450 million people live with a mental illness or behavioural disorder worldwide. The World Health Report 2007 indicates that neuropsychiatric disorders account for 13% of disability-adjusted life years. Studies attribute this burden, in part, to the chronicity of illness and the lack of, or limited access to, mental health services around the world. This limited access has become more salient in the context of the AIDS epidemic (WHO, 2010).

Common mental disorders (CMD) affect people across the world with a global lifetime prevalence of 29 % (Steel et al., 2014), presenting as a mixture of somatic, anxiety, and depressive symptoms, CMD increase the risk of developing both non-communicable and communicable diseases. Amongst people living with HIV (PLWH), CMD is a leading cause of disability and are known to hasten HIV disease progression, particularly in LMIC where low levels of CMD detection at the primary health care level are confounded by a large treatment gap for CMD (Maystim et al., 2012). HIV infection and psychiatric disorders have a complex relationship. Being HIV infected could result in psychiatric disorders as a psychological consequence of the infection or because of the effect of the HIV virus on

the brain. Disorders may be as varied as depression, post-traumatic stress disorders, AIDS phobias, grief and the whole gamut of cognitive disorders. Socio-demographic, Community and institutional factors may contribute to increase in the prevalence of mental illness among PLWHIV due to some experiences such as stigma, stress, institutional policy, availability of drugs etc.

Mental illness has been discovered as one of the challenges faced by people living with HIV in Uganda. However, Uganda government implement mid-term review which focuses on decentralization of mental health service coupled with an effort to combat HIV/AIDs in the country (AHSPR, 2014). Despite all the effort by the ministry of health (MOH) Uganda in the decentralization of mental health service coupled with an effort to convert HIV/AIDs in the Ugandan, HIV/AIDs and Mental illness is still a challenge in Uganda. Hence, these justify the need for this study to assess the factors influencing the occurrence of mental illness in people living with HIV/AIDs in Kampala international university teaching Hospital.

OBJECTIVE OF THE STUDY

The objective of the study was to determine the factors associated with the prevalence of mental illness among people living with

HIV/AIDS at Mulago teaching hospital, Kampala.

METHODS

Research Design

The study design used in this study is a cross-sectional study design, quantitative method of enquiry was used.

Sample Size

In order to obtain the sample size, keisler and leisle formula for sample size calculation was used. It was established that 15% of the people living with HIV attending KIU teaching hospital were suffering from mental illness. So after calculation: the sample size was found to be 195

Sampling Techniques

A purposive sampling technique was employed to focus on mental illness patient among people living with HIV/AIDS; convenience sampling technique was used to assess the mental illness patients.

Data Collection Instruments

The main data collection instrument used in the study was the structured questionnaire designed as a close-ended questionnaire. The variables in this study were used to design the questionnaire.

Data Analysis

Quantitative data were statistically analyzed using the Statistical Package for Social Sciences (SPSS) (version 17.0). univariate, bivariate and multivariate were performed to compare the influence of socio-demographic, community and institution factors on the occurrence of mental illness in persons living with HIV/AIDS.

Ethical Considerations

The researcher collected an introductory letter from Stafford University, addressed to the management of Mulago teaching hospital, Kampala to seek their permission to conduct the study. The consent to conduct the study at the hospital HIV and Psychiatry unit was sought for by the management indicated in the acceptance letter. Confidentiality and anonymity of information about the patients were considered by ensuring no name of patient/information was revealed.

RESULTS

The Prevalence of Mental Illness among People Living With HIV/Aids At Mulago Teaching Hospital Kampala.

The study found out that mental illness occurred in 70(41%) of the HIV patient and mental illness did not occur in 100 (59%) among people living with HIV/AIDs at Mulago teaching hospital Kampala, which indicates 4 out of every people living with HIV/AIDS do suffer from Mental illness.

The socio-demographic factors associated with the mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

Sex ($X^2= 45.967$, P-value =0.000); Age ($X^2= 93.069$, P-value =0.000); education status ($X^2= 18.604$, P-value =0.000); Income per month ($X^2= 50.477$, P-value =0.000) and employment status ($X^2= 10.637$, P-value =0.005), were the socio-demographic factors found to have statistically significant association with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

The community factors associated with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

Segregation ($X^2 =46.281$, P-value =0.000), Availability of health facilities for people living with HIV ($X^2 =91.960$, P-value =0.000), Community leaders responsive to HIV patients needs ($X^2 = 64.038$, P-value =0.000) and Perception of the entire community about HIV/AIDS ($X^2 = 78.380$, P-value =0.000) were the community factors found to have statistical significant association with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

The institutional factors associated the mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

Availability of drugs at the health facilities ($X^2= 50.000$, P-value =0.000); Health facilities well organized ($X^2= 98.000$, P-value =0.000) and waiting long at the health facilities ($X^2= 64.308$, P-value =0.000) were the institutional factors found to have statistically significant association with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

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	Variable	Frequency	Percentage
prevalence of mental illness among people living with HIV/AIDs	Occurred	70	41
	Not occurred	100	59

Variables	Categories	Mental illness among people living with HIV/AIDs		X²	P-value
		Occurred	Not-Occurred		
Sex	Male	0 (0)	21 (100)	45.967	0.000
	Female	44 (49)	45 (51)		
Age	0-10	0 (0)	53 (100)	93.069	0.000
	11-20	54 (81)	13 (19)		
	21-30	15(100)	0(0)		
	31-40	0 (0)	0 (0)		
	Above 40 years				
Education Status	No formal education	52 (44)	66 (56)	18.604	0.000
	Primary education	17 (100)	0 (0)		
	Secondary education	0	0		
	Tertiary education				
Marital Status	Single	2 (5)	35 (95)	1.198E2	
	Widow/widower	0 (0)	0 (0)		
	Co-habiting	21 (100)	0 (0)		
	Married	46 (96)	2 (4)		

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	Divorced	0 (0)	29 (100)		
Income per month	Below 200,000Ugx	0	35	50.477	0.000
	200,000-500,000 Ugx	48	18		
	Above 500,000 Ugx	21	13		
Employment Status	Employed	21	13	10.637	0.005
	Not-employed	33	21		
	Self-employed	15	32		

Variables	Categories	Mental illness among people living with HIV/AIDS		X ²	P-value
		Occurred	Not-Occurred		
Segregation	Yes	15	53	46.281	0.000
	No	54	13		
Stigmatized	Yes	31	19	3.768	0.052
	No	38	47		
Availability of health facilities for people living with HIV	Yes	31	51	91.960	0.000
	No	38	15		
Good local policy for people living with HIV	Yes	31	19	0.172	0.679
	No	38	47		
Aids or program developed to help HIV patients within the community	Yes	31	19	3.768	0.052
	No	38	47		

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Community leaders responsive to HIV patients needs	Yes No	48 21	2 64	64.038	0.000
Perception of the entire community about HIV/AIDS	Good Bad Horrible Resentful	67 2 0 0	15 35 16 0	78.380	0.000

		Mental illness among people living with HIV/AIDS		X²	P-value
Variables	Categories	Occurred	Not-Occurred		
Availability of drugs at the health facilities	Yes No	15 54	53 13	50.000	0.000
HIV counselling and testing often	Yes No	31 38	19 47	3.768	0.052
Health facilities well organized	Yes No	31 38	51 15	98.000	0.000
Government policies support HIV patients	Yes No	31 38	19 47	0.172	0.679
Health workers attitude towards HIV patients	Good Bad	31 38	19 47	3.768	0.052
Waiting long at the health facilities	Yes No	48 21	2 64	64.038	0.000

DISCUSSION

The Prevalence of Mental Illness among People Living With HIV/Aids at Mulago Teaching Hospital Kampala.

The study found out that mental illness occurred in 41% of the HIV patient and mental illness did not occur in 59% among people living with HIV/AIDs at Mulago teaching hospital Kampala, which indicates 4 out of every people living with HIV/AIDS do suffer from Mental illness. There is a high prevalence of mental illness among people living with HIV/AIDS. This is in line with a study conducted in Entebbe, Uganda, which states that the total prevalence of psychiatric disorder was 82.6 (38 out of 46 patients). Depressive and anxiety disorders were common. Another study that was conducted in Guru Teg Bahadur Hospital and University College of Medical Sciences, Delhi found the prevalence of mental illness to be 58.7%. The prevalence shows that there is a need for policymakers to develop policies or health intervention modes that could favour the HIV patients from developing mental illness.

The socio-demographic factors associated with the mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

Sex; Age, education status; Income per month and employment status were the socio-demographic factors found to have a statistically significant association with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala. This is in line with a study that was conducted in Guru Teg Bahadur Hospital and University College of Medical Sciences, Delhi. The prevalence of depression in patients with HIV under ART was 58.75%. The prevalence of depression increased with the severity of symptoms. The unemployed, uneducated, unmarried, belonging to joint families, having no or low family income, migrants, having an indifferent or poor relationship with spouse, poor social support and had visited commercial sex workers had a greater prevalence of depression. The rate of depression in patients with HIV/AIDS is very high. Detecting depression early and treating it goes a long way in improving the compliance to treatment as well as the quality of life (Bahatia, 2014).

The community factors associated with mental illness among people living with HIV/AIDs at Mulago teaching hospital Kampala.

Segregation, Availability of health facilities for people living with HIV, Community leaders responsive to HIV patient's needs

and Perception of the entire community about HIV/AIDS were the community factors found to have a statistically significant association with mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala. This is in line with a study which states that several biological and socioeconomic factors have been found to be associated with mental disorders in PLHIV such as depression and anxiety. These factors include compromised the immune system and increased opportunistic infections, the absence of ART, perceived social support, and death of significant other due to AIDS (Siyan et al., 2015).

The institutional factors associated the mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala.

Availability of drugs at the health facilities; Health facilities well organized and waiting long at the health facilities were the institutional factors found to have a statistically significant association with mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala. This is in line with a study that found drug use, both injection and non-injection, substantially increase the risk of mental disorder among HIV patients. Unavailability of appropriate drugs and

guidance on the drug use may influence the development of mental illness among HIV/AIDS patient (Klinkenberg WD et al., 2004)

CONCLUSION

In conclusion, the study found out that mental illness occurred in 41% of the HIV patient and mental illness did not occur in 59% of the respondents among people living with HIV/AIDS at Mulago teaching hospital Kampala, which indicates 4 out of every 10 people living with HIV/AIDS do suffer from Mental illness.

Sex, Age, education status; Income per month and employment status were the socio-demographic factors found to have a statistically significant association with mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala.

Segregation, Availability of health facilities for people living with HIV, Community leaders responsive to HIV patient's needs and Perception of the entire community about HIV/AIDS were the community factors found to have statistically significant association with mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala.

Availability of drugs at the health facilities; Health facilities well organized and waiting long at the health facilities were the institutional factors found to have a statistically significant association with mental illness among people living with HIV/AIDS at Mulago teaching hospital Kampala.

RECOMMENDATIONS

- Policies should be developed to secure all HIV/AIDS patient from any form of stigma, segregation and social violence.
- Social groups, community groups should be formed for the HIV/AIDS patient which will consist of several programs that will encourage social inclusion of the HIV/AIDS patients.
- Construction of mental health clinic for HIV patient for a timely checkup should be done
- Involvement of the community leaders in all activities of HIV/AIDS patients should be encouraged to ease they work, as they are closer to the community.

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