

PPP meets mental health needs in northern Uganda

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A partnership involving the public and private sector successfully addressed the mental health needs of people in the post-conflict regions of northern Uganda and could be used as a model in other post-conflict settings, according to a Health In Action article by Ugandan and US researchers published in this week's *PLOS Medicine* as part of an ongoing series on Global Mental Health Practice.

The authors, led by Etheldreda Nakimuli-Mpungu from the University of Makerere in Uganda, explain how the Peter C. Alderman Foundation (a US organization with a mission to heal the emotional wounds of victims of terrorism and mass violence in post-conflict countries) and Ugandan government institutions initiated a public–private partnership (PPP) to deliver low cost, evidence-based [mental health](#) care to traumatized populations in northern Uganda.

The PPP leveraged its pooled resources, raising patient care to a level that neither of the partners could provide by working alone. The partnership also employed a systems approach to mental [health care](#), wherein clinics could deliver uniform treatment that was locally adapted to each tribal culture.

The authors report that over a 6-year period (2005–2011), the partners established five psycho-[trauma centers](#) and people attending the clinics increased from 300 in 2007 to over 3,000 by June 2012.

The authors found that the most common diagnoses in people attending

the clinics were depression, post-traumatic stress disorder, epilepsy, and alcohol and substance use. Women were significantly more likely to have depression, [post-traumatic stress disorder](#), and/or grief reaction, and men were more likely to suffer from alcohol and substance use disorders and/or major mental disorders (such as bipolar disorder and psychosis). Over a 6-month period, there was a reduction in the proportion of patients who had high depression and PTSD symptom scores with a concomitant increase in the proportion of patients with high function scores.

The authors say: "We believe that this partnership provides a model for integrating [mental health care](#) into the primary care system in low-and middle-income countries."

They continue: "Moreover, we believe it is replicable, and can be rolled out in other post-conflict countries facing similar public health problems."

More information: Nakimuli-Mpungu E, Alderman S, Kinyanda E, Allden K, Betancourt TS, et al. (2013) Implementation and Scale-Up of Psycho-Trauma Centers in a Post-Conflict Area: A Case Study of a Private Public Partnership in Northern Uganda. PLoS Med 10(4): e1001427. [doi:10.1371/journal.pmed.1001427](https://doi.org/10.1371/journal.pmed.1001427)

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