

Pattern of Mental Disorders among the Students of the University of Gezira-Sudan

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Abstarct:

This retrospective study was conducted in the University of Gezira (U of G) - Sudan, in the year 2009. The objective of the study was to describe the pattern of mental disorders among the students of (U of G) and to assess the services provided for them. The data of 200 students suffering from mental disorders, total coverage, was obtained by reviewing the records of the health services of the university, interview with the Director General of Psychiatry and Mental Health Hospital and with the psychologist responsible for dealing with students suffering from mental disorders.

The results revealed the following: the prevalence of mental disorders among the students of (U of G) was found to be (0.8%), more than half (51.5%) were females, male students were (48.9%), (57.5%) of them were residing outside Medani. Regarding their tribes the majority were from Galli tribe the other tribes were all represented with different rates. The following types of mental disorders described among the students, depression (42%), dissociative (23%), Schizophrenia (13%), Mania (6.5%), Epilepsy (9%), Anxiety (3%), Headache (2.5%). The faculty of Computer and Mathematic of sciences showed a big number of mental disorder students compared to the other faculties. The study also showed lack of close follow up from the students themselves and their families. A problem of continuation of the treatment was observed. The study recommended; special mental health unit in the different faculties, Free drugs for mental disorders, Provision of mental health promotional services at the university including mental health education and screening services.

Key wards: Mental health, University of Gezira Pattern

Introduction:

Mental Health is the balance of the individual's personality and emotional attitudes, which enable him to live harmoniously with his fellow men. Mental health is not exclusively a matter of relationship between persons; it is also a matter of relationship of the individual towards the community he lives in, towards the society of which the community is a part and towards the social institutions which for a large part guide his life, determine his way of living, working, leisure, and the way he earns and spends his money, the way he sees happiness, stability and security. (1)

Mental health problems are common among young people. It has been estimated that up to 25% of children and young people under the age of 16 have a diagnosable mental health problem. These problems include depression, deliberate self-harm, eating disorders and substance misuse. It is estimated that between 10% and 20% of children will have a problem that is severe enough to require help. The chances are that many of these problems persist through teenage years and into

adulthood. Also, many problems become exacerbated when someone starts university ⁽²⁾. For some young people, difficulties at College/University such as bullying, peer pressure, boredom, exam stress or problems relating to exclusion can lead to mental distress. ⁽²⁾

Types of mental illness:

Mental illness is a vast subject, broad in its limits and difficult to define precisely. There are major and minor illnesses. The major illnesses are called psychoses. Here the person is "insane" and out of touch with reality. There are three major illnesses: (1) SCHIZOPHRENIA (split personality) in which the patient lives in a dream world of his own. (2) MANIC DEPRESSIVE PSYCHOSES in which the symptoms vary from heights of excitement to depths of depression and (3) PARANOIA which is associated with undue and extreme suspicion and a progressive tendency to regard the whole world in a framework of delusions. The minor illnesses are of two groups: (a) NEUROSIS OR PSYCHONEUROSIS: in this the patient is unable to react normally to life situation. He is not considered "insane" by his associates but nevertheless exhibits certain peculiar symptoms such as morbid fears, compulsions and obsessions,(b) PERSONALITY AND CHARACTER DISORDERS:

This group of disorders are the legacy of unfortunate childhood experiences and perceptions (1).

The University of Gezira:-

The University of Gezira has been effectively established in the city of Wad Medani; the capital of the Gezira State in accordance with a republican Decree issued on the 19th of November 1975. Gezira State, which is probably the second state in the country, is also distinguished for its economic activity as it embraces the mammoth Gezira agricultural scheme established in the mid twenties of the last century.(3)

Rationale:-

Mental disorders are common. More than one in three people in most countries reporting diagnosis at least one at some point in their life up to the time they were assessed. Actual lifetime prevalence rates for mental disorders are estimated to be between 65% and 85%.

The study suggests the potential importance of improving the mental care of those with mental disorders, as step towards reducing the complications and improving the prognosis.

Objectives:

General Objective:

• To describe the pattern of mental disorders among students of (U of G).

Specific Objectives:

- To determine the prevalence of Mental Disorders of (U of G) Students
- To identify the different types of Mental Disorders of (U of G)
 Students
- To describe how these diseases vary by gender race/ethnicity and other characteristics of students

Methodology:

Type of Study: Retrospective Descriptive Study.

Study Area and settings: U of G: which includes 19 faculties (Medicine –Dentistry – Pharmacy – Applied Medical Sciences - Medical Laboratory Sciences – Health And Environmental Sciences – Engineering And Technology – Textiles – Mathematical And Computer Sciences – Agricultural Sciences - Agriculture And Natural Resources – Animal Production – Economics And Rural Development – Communication Sciences – Administration Science And Economics - Educational Science and 3 Faculties of Educations).

Administration of Health Services of (U of G):-

This Administration is responsible for providing Health Services all over the UofG through (13) Health Centres which are distributed and located in different faculties of (U of G).

Aims and Objectives of the services:-

- Provision of Health Services (Therapeutic and Preventive) for all Students; Academic Staff and non-Academic Staff.
- Provision of Health Services at the level of Medical Officers, Lab Technicians, Assistant pharmacist, Nurses, Statistical Reporter, Psychologists.
- Pick up the cases (Chronic problems eg, Mental Disorders) in the first Medical Examination and during study period.
 - Referring the especial cases to the specialized units.

Study Population: Students of U of G (24351) distributed in the different faculties.

Sampling Technique: Total coverage of Students of Gezira University suffering from mental disorders from Batch15 to 30 in the 13 Health Centres, 200 students.

Study Tools: Records of students attending the 13 health centers between 2000-2009, were reviewed, the incomplete data were excluded

Interviews were also conducted with the General Director of psychiatric and mental health hospital and the psychologist responsible for managing mental disordered students.

Results:

Out of the total number of the students (200) suffering from mental illness 97, (48.5%) were males and 103 (51.5%) were females Table (1).

More than half were resident outside Medani Town (115, 57.5%) table (3).

Figure (3) shows the distribution of mental disordered students according to the different Sudanese tribes the majority were from Galli tribe (43, 21.5%).

Depression was the most common type of mental illnesses among the students (18, 42%) followed by dissociative (46, 23%), Schizophrenia (26, 13%), Mania (13, 6.5%), Epilepsy (18,

9%), Anxiety (6, 3%), Headache (5, 2.5%) Figure (4).

Figure (5) shows the distribution of the students by the different batches. The majority were from the batches (27-29).

Table (2) showed the distribution of the students suffering from mental illnesses by faculties; the vast majority were from the faculty of Computer and Mathematical Sciences (56, 28%).

Table (1): Distribution of mental disorders according the sex.

Sex	Frequency/Percentage
Male	97 (48.5%)
Female	103 (51.5%)
Total	200 (100%)

Table (2): Distribution of students by residence:

Residence	Frequency/Percentage
Inside Medani	85 (42.5%)
Outside Medani	115 (57.5%)
Total	200 (100%)

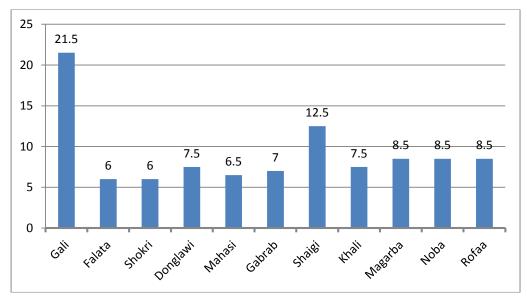


Figure (2): Distribution of mental disordered students according to the tribes

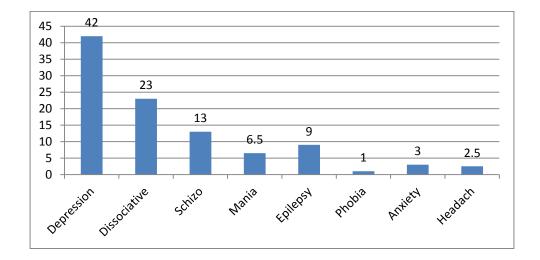


Figure (3): Distribution of mental disorders according to the diagnosis

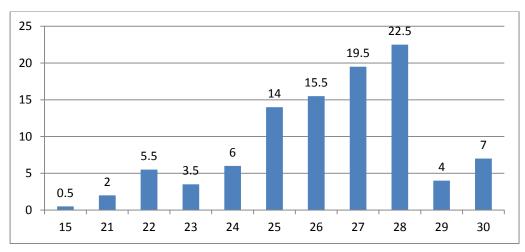


Figure (4) Distribution of students according to their batches

Table (3) Distribution of students according to their faculties

Faculties	Frequency/Percentage
Economic	15 (7.5%)
Telecommunication	4 (2%)
Agriculture	5 (2.5%)
Technology	48 (24%)
Ed-Hasahisa	5 (2.55)
Health Elhosh	1 (0.5%)
Ed- Alkamlin	2 (1%)
Computer Mathematic	56 (28%)
Medicine	13 (6.5%)
Textile	1 (0.5%)
Ed- Rofaa	27 (13.5%)
Ed – Hantoub	21 (10.5%)
Pharmacy	2 (1%)
Total	200 (100%)

Results of the interviews:

The interview was done with the psychiatrists and psychologists responsible for managing mental disordered students. The mental disordered students were picked during the entry medical examination, or referred from their academic supervisors or from the medical officers in charge of the Health Centre from different faculties, the cases were registered.

The psychologist: conducted a case study which covered (General appearance, walking, speaking, and ability to solve the problems, personality behaviour, attitudes, social relationship with the family, colleagues and teachers. Habits like smoking, snuff, Alcohol or drugs. Family history of Mental Disorder, income, socioeconomic status).

After making differential diagnosis, the psychologist refers the case to the psychiatrist. She referred that there was lack of awareness of the students and their families and colleagues about the importance of follow up and regular treatment and she observed the stigma surrounding the mental health problem.

The psychiatrist was responsible for making the final diagnosis and prescribing the treatment and deciding the follow up in the schedule. There is no special mental health unit in the faculties.

The problem facing the psychiatrist was irregularity of the treatment and follow up specially those who lives outside Medani, because the majority of the families believe in the traditional healers instead of medical treatment.

Discussion:

The prevalence of mental disorders among the university students in this study was found to be 0.82%. This is similar to European study 2004, and community reactions to mental disorders- A key informant study in three developing countries ⁽⁵⁾.

Figure (1) Shows the percentage of mental disorder students according to their sex, which revealed that the females were more commonly affected (51.5%) than males (48.5%). This is similar to the study of the prevalence of mental disorders in Europe females also were more affected than males, especially unemployed persons, disabled persons and persons who were never married or previously married and this result differs from the study of epidemiology of mental disorders in young adults of a newly urbanized area in Khartoum –Sudan (there was no sex difference). (6)

Table (1): Shows more than half of cases were originally residing outside Madani town. This can be attributed to the change from the home environment, the stress facing the students due to different atmosphere and the academic responsibilities adding to that the economics and social pressures in the new settings, so difficulties in adaptation to the university and to the colleagues can be the cause.

Figure (2): Explains the distribution of mental disorders students according to their tribes, most of them were belonging to Gali tribe. This can be due to the genetic, ethnic and socioeconomic factors or may be due to the relative size of these tribes in Sudan.

As shown in figure (3): The most prevailing mental health problems were depression (42%).

The distribution of different types of mental disorders in this study are the same as studies of Epidemiology of mental disorders in young adults of a newly urbanize and the prevalence of mental disorders in Europe study 2004 ⁽⁶⁾. However, the rate of depression in this study was found to be higher than that of a study in Makerere University in Uganda ⁽⁷⁾. In a study from Suo Paulo, Brazil, Nogueira-Marten et al., ⁽⁸⁾ reported a rate of depression 44%. In an investigation carried out in students in Turkey, Bostanci et al, ⁽⁹⁾ reported a prevalence rate of 32.1% for depression,

associated with poor academic performance.

Results from Ibadan Nigeria indicated that 21% of students had mental health problems due to family problems (10).

A recent study from Nalugya (11) indicated a higher rate of mental disorders (21%) mainly depression and anxiety disorders among secondary school students joining Makerere university. They might have carried their mental health conditions in earlier years. The results suggest the need for the provision of mental health promotion and services in the university including mental health, educational and screening services.

The faculty of Medicine in Uganda implemented a counselling services provided by trained peer counsellors. The evaluation of these experiences showed a decrease of rate of depression among the group who are exposed to this counselling strategy.

In 2005 a review of surveys in 16 European countries found that (27%) of adult Europeans are affected by at least one mental disorder in a 12 month period ⁽⁶⁾.

An International review of studies on the prevalence of Schizophrenia found an average figure of (0.4%) that is different from this study in which schizophrenia was found to be (13%).

Figure (5) shows that the big number of mental disorders in the faculty Mathematical and Computer Sciences can be attributed to the big number of students enrolled in the faculty.

The interview with psychiatrist and psychologist revealed a problem in continuity of the treatment, follow up, and lack of involvement of their families, which is an important factor in the comprehensive treatment for such illness.

It highlights the importance of education to the families and communities.

Recommendations:

- Establishing a special mental health unit in the different faculties
- To conduct awareness raising activities among the students, and families to ensure proper treatment and follow-up.
- Provision of Free drugs for mental disorders should be availed.
- Provision of mental health promotional services at the university including mental health educational and screening services.

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