

## POST-WAR MENTAL HEALTH PROMOTION IN BOSNIA-HERZEGOVINA

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### SUMMARY

*After the war in Bosnia-Herzegovina, mental illness is very prevalent. With little knowledge about mental health, the stigma of mental illness is still pervasive in many communities. To combat this prejudice, we describe mental health promotion strategies which can empower individuals and educate the communities in which they live.*

**Key words:** mental health promotion – Bosnia and Herzegovina – empowerment

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### INTRODUCTION

There are often visible and specific differences in the behaviour of mentally well and mentally ill persons. Noisy communications, disruptive actions, uncontrolled muscle movements and emotional outbursts often seem unacceptable in communal situations. These behaviours make it difficult for the so-called “normal population” to communicate comfortably with mentally ill persons. Very often these shunned people are felt to be mystical, dangerous or evil, and their mental illness is labeled as punishment. Because of such stigma, all aspects of mental health are burdened with the same attitudes and prejudices (Link et al. 2004). One way to change these perceptions is to educate the community more fully about mental health issues.

This paper describes the development of mental health promotion strategies for municipal communities in Tuzla Canton, northeastern Bosnia-Herzegovina. In this country, mental health promotion is a relatively new, evolving and very exciting area of public health. The paper brings together practitioner and research perspectives on a community-based educational project targeting post-war mental health problems. The factors that

have made this initiative possible and have facilitated its development to date are described.

### STIGMA AND MENTAL DISORDERS

It is well known that mental illness has been misunderstood throughout human history. Even today in our technologically-advanced world there is sometimes still a stigma and lack of awareness about mental health problems. There is a mortality crisis related to mental ill health in Eastern European populations of transition (Rutz 2001). In Bosnia the mental health of many citizens was seriously damaged during and after the recent war (Hasanović et al. 2005, Husain et al. 1998, Cerić et al. 1999, Husain 1999). Each year there are increasing numbers of different mental disorders documented, usually related to war experiences or subsequent difficult life conditions. The awareness of social conceptions of mental illness is essential in understanding the social realities of people with mental illness. Labelling due to psychiatric hospitalization can have a powerful influence on people's life chances. Little is known about subjective perceptions of stigmatization and discrimination and the influence of these beliefs on the quality of life of mentally ill people. For

planning and implementing psychiatric treatment programs, it is important to be aware of social conceptions of mental disorder (Graf et al. 2004). Health professionals as well as lay persons are concerned about this situation.

## **MENTAL HEALTH AND CONCEPT OF EMPOWERMENT**

Good mental health is the capacity for each of us to feel, think and act in ways that enhance our ability to enjoy life and deal with its challenges. Mental health promotion is the process of enhancing the capacity of individuals to take control over their lives and improve their mental health: it empowers people and communities to interact with their environment in ways that enhance emotional and spiritual strength.

The concept of empowerment provides the basic framework upon which the foundation of mental health promotion is constructed. Empowerment involves recognition by an individual of the need to foster his own sense of personal strength: this includes the ability to determine one's own destiny in a supportive community environment, with the necessary personal and material resources. Empowerment also involves a sense of personal control; the feeling that one can rely on oneself or supportive others when facing difficult situations. With this approach we can foster individual resilience as well as promote socially supportive environments.

Resilience is also an integral part of good mental health. Every life is a series of ups and downs; our capacity for resilience determines whether we bounce back from our lows and learn from them in a positive way or whether we are left in a state of frustration, depression or self-destruction. Broadly defined, individual resilience is a sense of flexibility, the capacity to re-establish one's own balance and the essential feeling of being in control with regard to oneself and to the outside world.

The sense of being in control can be related to three fundamental concepts:

- a sense of being - the way we are and how we

feel about ourselves;

- a sense of belonging - the way we relate to others and to our social, physical and cultural environments;
- a sense of becoming - what we do in our lives, our aspirations and how we develop.

Living effectively in a community requires the existence of opportunities to participate in 'everyday' activities. Finance is one crucial factor that can enable or hinder someone from playing a fulfilling and useful part in the community (McCrone 1999). There are many difficulties faced by mentally-ill people and their care providers in receiving assistance because of misunderstanding and prejudice from the community. Impoverishment perpetuates the isolation of these individuals from community support and involvement.

## **MENTAL HEALTH REFORM IN TUZLA CANTON**

Mental health disorders have been identified as the predominant current health-related issue in Bosnia and Herzegovina. Furthermore, our clinical experience has shown the need for mental health promotion and education to dispel the prejudice and fear that many still feel about mental disorders. Given the extent of the problem, the response to mental illness as a public health issue to date has been grossly inadequate.

To rectify this imbalance, a nationally-directed initiative of Mental Health Reform was begun in Tuzla Canton by the Tuzla Canton Psychiatry Association. This outreach is based on model programs used elsewhere in Europe (Crag Working Group on Mental Health 1994, Lehtinen et al. 1997, Mental Health Promotion for Children up to six years 1999). Until recently, Research on prevention was directed mainly at the design and testing of these model programs. However, successful use of the 'model program strategy' requires attention to the pre-conditions for their effective dissemination, adoption and implementation. In this regard, not only are conceptual clarity and a scientific underpinning

crucial, but also collaborative organizational structures are needed at national and international level (Hosman & Engels 1999). Partnerships between national and international organizations, especially WHO and the European Union, have to be strengthened to make progress on the way to integrated community mental health services (Rutz 2001).

Modern information systems are remarkably powerful, but to understand the significance of them, it is important to understand the role that information itself plays in the day-to-day life of people using mental health services (Crepaz-Keay 1999). Well-informed people worry less about their health and are better able to manage it (Oliver & Paxton 1999). Using media, public lectures, workshops, and round tables we are now trying to share information as widely as possible, specifically about community mental health care, the establishment of Mental Health Care Reform and the upgrading of our primary healthcare system. In this process, we have had significant ongoing assistance from mental health and primary care professionals from USA, Canada, Croatia, Holland, Sweden, Italy and Belgium.

We have tried to disseminate mental health information in many ways. In 1999 we successfully organized a national psychiatry conference to exchange experiences, reflections and attitudes amongst mental health professionals after the war. We organized international psychological trauma courses in collaboration with Missouri University, Columbia, USA, for teachers, theologians, officers and mental health professionals. Again in 1999, helped by World Islamic Association for Mental Health (WIAMH) and Tuzla Canton Government, we successfully organized the 6<sup>th</sup> International Congress of WIAMH. In 2002 we published a monograph entitled "Spirituality and Mental Health" which included selected papers from this Congress. Later educational seminars for theologians regarding drug abuse led to the publication of a monograph entitled "Drug Dependency-Causes and Consequences, Prevention and Treatment". This publication is now recommended as a learning tool

for parents of drug abusers and for students of different faculties in the University. Together with professors from Missouri University we organized educational seminars about adolescent psychology, trauma psychology and a leadership program for professors and students of an Islamic secondary school in Tuzla. Since 1996 psychiatry residents and specialists from our Clinic completed all the seminars about mental health care for refugees and other Bosnia-Herzegovina war victims, organized in Croatia and Bosnia-Herzegovina, based on the Harvard Program in Refugee Trauma (HPRT) from the Massachusetts General Hospital, Cambridge – USA. We actively work on the implementation of mental health care improvements into primary health care medicine - family medicine. At the university level in collaboration with HPRT, we worked on the implementation of the "Pedagogy of Trauma" training for family physicians and professionals of different disciplines who are involved with traumatized persons. From 2003 onwards, with Tuzla University we helped to organize a new one semestar subject - theory and practice of Communication Psychology, for the first year, students of Medical school.

Another major initiative involved starting up three community associations to deal with different mental health issues. One association directly assists individuals with mental disorders: another is an association of parents and friends of drug abusers: the third is an association of Tuzla Canton War veterans (1992-1995) suffering from PTSD. All of these associations are actively involved in education to destigmatize mental health disorders.

Within the framework of this Mental Health Reform initiative, our psychiatry clinic in Tuzla and the Tuzla Canton Psychiatry Association proposed the inclusion of a "Mental Health Week". This is held in October every year and timed to coincide with the World Day of Mental Health as organized by the World Federation for Mental Health. The 2004 Mental Health Week included psychiatrists as well as family physicians from the Tuzla Family Medicine Teaching Centre, and emphasized the importance of close collaboration

of health care professionals regardless of their medical specialty. During this week, information was given to the community about mental health disorders, about risk factors for the development of those disorders, about ways to help mentally-ill individuals and about the importance of a supportive community in the prevention of mental disorders.

A day hospital program, established in 1999, gives patients a stable routine within the framework of community living. Activities include art therapy, music therapy, dance therapy, occupational therapy and group therapy. Continual upgrading and education for psychiatric nurses is essential for these activities to prosper. For psychiatrists, psychologists, social workers and theologians there is also education in group therapy and in process-oriented supervision.

This national and community-based strategy for mental health promotion promises a new direction and new emphasis in policy, with measures that will enhance the quality of life for all individuals. There is an attempt to address the current gap between policy and mental health professionals' experience, but many questions remain about its coherence with these policies and with local implementation. In the future it will be necessary to establish criteria to evaluate the success of the program and its impact on mental health care (Banks 1999).

Our experience with this program encourages us to believe that mental health, as opposed to mental illness, is beginning to move up the political agenda: however, much still needs to be done. The challenge for mental health promotion in Bosnia and Herzegovina is its coordination with the other areas of mental health policy, programs and service delivery. An increased emphasis on mental health promotion, recognizing that every individual has mental health needs, is a priority. Such needs underpin all health and well being and provide a rationale for placing mental health at the centre of a new public health debate (Friedli 1999).

## CONCLUSIONS

Post-war mental health care reform in Bosnia and Herzegovina is a priority. To realize such a difficult goal we use a modern mental health promotion approach based on European programs. This approach fosters personal resilience and empowers all individuals to strengthen their coping skills, self-esteem and personal efficacy. This then allows the individuals to effectively utilize the resources offered by a supportive environment.

Using media and public activities at both a national and local level, we are endeavoring to inform the population about crucial mental health issues. We have organized conferences and written papers for both mental health and other community professionals. We have established a yearly "Mental Health Week" to inform health care workers and the local community about mental disorders. We are trying to constantly improve the education of nurses and health workers involved in the daily care of mentally-ill persons.

This strategy for mental health promotion promises a new direction and new emphasis in mental health care policy in Bosnia. We will attempt to continue to find ways to enhance the quality of life for all mentally ill individuals and their health care providers. We will try to establish criteria that could evaluate the success of this strategy and its impact on the community. Through implementation in daily practice, we look forward to achieving many benefits for our clients. In addition we hope for further development and modernization of mental health care in Bosnia-Herzegovina.

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