

ALCOHOL DEPENDENCY VIRTUAL COUNSELLING, A CASE STUDY

Dr Yacoub A. Hachine, MBCHB, MBA, PGDip in Clinical Psychiatry

CEO of Vigilant Living (Longevity, Productivity and Meaning)

Executive Director of African Health Coaching Association



I hereby declare that I have no financial, personal, or professional conflicts of interest related to the content of this presentation.

I also confirm that I have not received any funding, sponsorship, or support from the alcohol industry or related organizations.

My views and recommendations are based solely on available evidence and are intended to advance the understanding and prevention of alcohol-related harm.

INTRODUCTION

A 24 year old female law student who presented with a history of alcohol dependency for the last 6 months. The condition was perpetuated by a recent relationship breakdown with father of one of her two kids. The boyfriend was physically abusive just like the father of her first child. She is drinking profusely, missing classes due to sleeping in the morning, having emotional outbursts. She was referred by another client who was worried about her wellbeing. Currently she stays with her grandmother, her mother has died and her father is estranged while her aunt has chased her away who was her sponsor. She has a personality trait which is high neuroticism. She doesn't go to church and she doesn't have social activities which doesn't involve alcohol. She is in a recurrent debt and brokenness status. Her marks have been worsening gradually so she is considering dead semester. She doesn't believe that life has any meaning. Her kids are her last hope.

DEFINITION

According to the [DSM-IV](#) criteria for alcohol dependence, at least three out of seven of the following criteria must be manifest during a 12-month period:

- Tolerance
- Withdrawal symptoms or clinically defined [alcohol withdrawal syndrome](#)
- Use in larger amounts or for longer periods than intended
- Persistent desire or unsuccessful efforts to cut down on alcohol use
- Time is spent obtaining alcohol or recovering from effects
- Social, occupational and recreational pursuits are given up or reduced because of alcohol use
- Use is continued despite knowledge of alcohol-related harm (physical or psychological)

RISK FACTORS



- ◆ Drug use at a young age
- ◆ Drug availability
- ◆ Genetic risk factors
- ◆ Mental illness, stress, or abuse
- ◆ Poor grades
- ◆ Certain personality traits, such as aggression or poor social skills
- ◆ Family or friends who use drugs
- ◆ Poor relationships with parents
- ◆ Peer pressure

PROTECTIVE FACTORS



- ◆ Never using drugs; having a plan for saying no if offered drugs
- ◆ High self-control
- ◆ Undergoing treatment for mental and physical illnesses
- ◆ Academic achievement; goals that challenge the brain and/or body
- ◆ Close, supportive friends who don't use drugs
- ◆ High parental involvement, including good communication
- ◆ Involvement in school, religious, and/or community activities

Experts are concerned about the rising number of children with mental health challenges.

BY TONNY ABET

One in three Ugandans is struggling with poor mental health, according to a new study released by the Health ministry on Tuesday to coincide with World Mental Health Day.

Makerere University School of Public Health and Butabika Hospital conducted the study among 2,067 people in Adjumani in the northern region, Bushenyi in the west, Butabala in central region and Kapchorwa in the east.

Dr Juliet Nakku, the lead investigator who also heads Butabika National Referral Mental Hospital, said the study done between March and September focused on integrating mental health services into primary healthcare.

"Burden of anxiety, as well as moderate and severe depression are common," she said as she highlighted the findings. "Anxiety and depression are more frequent in females. Alcohol-use disorders are similar to national trends."

Dr Fredrick Makumbi, a co-principal investigator and an associate professor at Makerere University, said the study was done in communities, schools and primary healthcare facilities.

The researcher said an assessment on the occurrence of common mental disorders showed that out of every 100 adults interviewed within community settings, 33 percent of 532 adults had severe anxiety. "Eighteen percent had moderately severe or severe depression," he added.

Some of the stress factors triggering mental health challenges, officials said, include drug and alcohol abuse, domestic violence, poverty, head injuries resulting in loss of proper cognitive functioning, and stress arising from work, school and personal relationships. Dr Makumbi said assessments found seven out of 100 respondents had harmful use of alcohol, and alcohol dependence.

The researchers randomly selected the sample of child respondents from a list of eligible children. Households to interview were also randomly selected. The findings are similar to previous research which has shown a rise in mental health challenges in the country.

Growing crisis

While it might not be surprising to

30 percent of Ugandans have mental disorders, new study



Dr Diana Atwine, the permanent secretary of the Health Ministry (right) tours exhibition stalls during the World Mental Health Day celebrations in Kampala yesterday. PHOTO/TONNY ABET

find elevated stress levels among adults juggling life and work, Dr Nakku noted a high level of mental health challenges among 1,366 children in 33 schools the researchers visited.

"One in three children had emotional problems. We were comparing with the national average of the United Kingdom, ours was three times higher," she said. "For the UK, according to the questionnaire that we used, it would have been about 10 percent but ours was 30 percent."

Dr Nakku added: "These are very high

rates. It affects home life and academic life as well. If we want high achievers in schools, they are not going to be those children with mental problems."

Researchers also conducted exit interviews of 160 people leaving primary healthcare facilities. Ms Rose Kisa, a research fellow at Makerere University, said 76 percent had severe anxiety disorder, 48 percent had moderately-severe-to-severe depression, and about four percent reported harmful use of alcohol or alcohol dependence.

The study found that mental health

care was low in public health facilities due to limited knowledge and skills in handling patients. The researchers also reported high levels of stigma against people with mental challenges which, they noted, reduced willingness to seek care and also made it harder for patients and those recovering to be integrated back into their communities.

Partly as a result of the low availability of care, about one in 10 people with mental health challenges sought help from religious leaders and traditional healers, according to the report, instead

of qualified medical caregivers.

Promise

Launching the report on Tuesday, Dr Diana Atwine, the permanent secretary of the Health ministry, said the government will increase access to mental health services by decentralising care to lower-level healthcare facilities.

Currently, most people access mental health care from Kampala-based Butabika National Referral Hospital, and 13 regional referral hospitals.

"We must train health workers and community health workers to recognise all forms of mental illness. We need to institute programmes in schools, create an environment where our young children have less stress," Dr Atwine said.

"We need to continue sensitising the public that mental health illness is real but it can be prevented and it can be cured. We are losing many that we could save, many still believe in witchcraft which delays them from accessing care," she added.

The theme for this year's World Mental Health Day was "Mental health is a universal human right" to improve knowledge, raise awareness and drive actions that promote and protect everyone's mental health as a universal human right.

"Mental health is a basic human right for all people," the World Health Organisation noted in a statement. "Everyone, whoever and wherever they are, has a right to the highest attainable standard of mental health. This includes the right to be protected from mental health risks, the right to available, accessible, acceptable, and good quality care, and the right to liberty, independence and inclusion in the community."

"Good mental health is vital to our overall health and well-being. Yet one in eight people globally are living with mental health conditions, which can impact their physical health, their well-being, how they connect with others, and their livelihoods. Mental health conditions are also affecting an increasing number of adolescents and young people."

tabet@ug.nationmedia.com

SIGNS YOU OR LOVED ONE MIGHT NEED HELP

- You are feeling sad or down for more than two weeks.
- You can't sleep at night or are experiencing interrupted sleep.
- You have developed an unhealthy relationship with food and your eating patterns have changed: either you have lost your appetite, or you can't stop yourself from eating too much (emotional eating).
- You experience sudden fear that

cannot be explained. You feel panicked, your heart starts racing, and you can't calm your breathing.

- Your energy level decreases, and you feel discouraged.
- Drastic changes in behaviour and severe mood swings that affect daily activities and relationships with family and friends.
- You feel nervous, stressed, worried or on the edge all the time.
- Use of drugs and alcohol to cope.
- You feel like you want to sleep without waking up.
- You are engaging in fights,

experiencing violence or abuse.

Source: UNICEF

Where to go for help

If you are feeling blue and think you need to talk to someone about your mental health, speak to your doctor or contact Mental Health Uganda on toll-free number 0800-21-21-21 (free from all networks). You can find more information at [mentalhealthuganda.org](https://www.who.int/campaigns/world-mental-health-day/2023) or at <https://www.who.int/campaigns/world-mental-health-day/2023>

MANAGEMENT

- This client received combination of psychoeducation, analytical psychotherapy, cognitive behavioral therapy and motivational interviewing for the last 3 months.
- We co- created life goals, tasks and daily/weekly schedule to achieve those goals.
- This involved weekly sessions, daily check ins and journaling.
- There was monthly virtual group sessions with other clients dealing with different mental health challenges including substance use disorders.
- We had reached out to her family and church community for supporting her in this journey as well as creating new friends and reducing contact with alcoholic friends.
- She reports to have get a grip on her drinking, so that she can be a better mother and a student. This is also proven by her daily check-ins with me which has went from at least 2 drinks per day to less 3 drinks per week in the last month.

ANALYSIS

Youth prefer virtual psychotherapy for a number of reasons, including:

- **Comfort and familiarity:** Teens are often more comfortable communicating online, where they feel less self-conscious and judged.
- **Privacy:** Virtual therapy offers a level of discretion that traditional therapy settings may not.
- **Convenience:** Online therapy is more convenient for both teens and parents, as there's no need to commute to a therapist's office.
- **Accessibility:** Video calls allow clients to interact with therapists anytime and anywhere, making it easier to schedule appointments around busy schedules.
- **Affordability:** Some online therapy platforms offer more affordable mental health services than traditional therapy.
- **Flexibility:** Online counseling can provide more flexibility when it comes to appointment times and scheduling.
- **Support:** Online counseling can provide extra support and help from people who've dedicated their lives to working with these age groups.

CONCLUSION

This case study shows the value of virtual therapy for people living with alcohol dependency who often either cannot access a therapist or cannot afford their services as most of rehabilitation center are more than 100,000 ugx per day on top of them being in-patient care meaning someone who has dependents or responsibilities would not forsake them. Through a subsidized virtual counselling, a lot of Ugandans would be able to overcome alcohol dependency especially amongst the youth in Uganda and avoid other illicit substance as alcohol is often a gateway drug for more harmful substances.

THANK YOU

“Show me a drunk and I’ll show you someone in search of God” Carl Jung, one of the fathers of psychoanalysis psychotherapy.

“Suffering without a meaning is despair” Viktor Frankl, a psychiatrist and founder of meaning-based therapy.