

WORLD TRENDS

Mentally Ill in Africa, and Kept Chained in Camps

Continued from Page 1

than a promise of change, as the culmination of years of efforts by doctors, field workers and advocates across the developing world. According to the World Health Organization, most countries in Africa, if they have a dedicated budget for mental health care at all, devote an average of less than 1 percent of their health spending to the problem, compared with 6 to 12 percent in the wealthy countries of the West. At last count, Liberia had just one practicing psychiatrist. Nigeria had three, Togo four and Benin seven. Sierra Leone had none.

For now in Africa, it is the families of people with mental illnesses who bear the overwhelming costs of care — and the greatest burden falls on mothers, sisters and daughters.

"I wondered if he would ever get better," Ms. Gbedjeha said.

One morning in January, she went to see her brother and found only his broken chain. The camp quickly assembled a search party.

Good estimates of the number of West Africans with mental illnesses living in chains are not available.

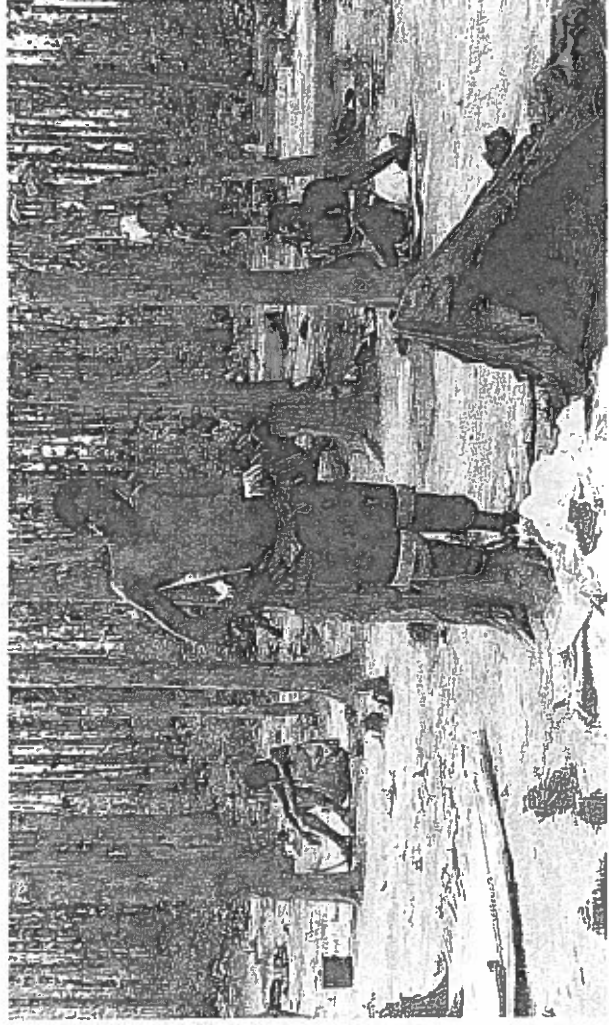
The camps in Togo vary widely in character. They include Jesus Is the Solution, a large operation, as well as bare-bones family units like Solaso, which means "place of refuge," on the outskirts of the capital, Lomé. The camps often reflect the personality of the head pastor, whether grandiose or humble.

In Ghana, Human Rights Watch visited eight camps with roots in Pentecostal or evangelical denominations that held close to 200 people. Nearly all were chained by their ankles to trees, the group reported in 2012.

In Western countries, hundreds of thousands of people with psychosis or other severe mental health problems land in prison. In Indonesia and other parts of Asia, restraints — like shackles or even cages — are also common. Surveys, like one by psychiatrists at the University of Ibadan in Nigeria, put the prevalence of schizophrenia, characterized by hallucinations and delusions, at 0.5 to 2.5 percent, roughly the same as the global prevalence. That is at least a million people in countries where chaining is common, like Togo, Ghana and Nigeria.

Chaining people against their will violates the United Nations' disability rights convention, which most West African countries, including Togo, Ghana and Nigeria, have ratified. But religious feeling is strong in this

Samuel Kpavouyou contributed reporting.



A MAN SELLS THE NEW YORK TIMES

Families bear the brunt of caring for the mentally ill in West Africa, where little money is spent on mental health. The families often rely on prayer on prayer camps, where chains are used to control the most troubled.

part of the world, and the pastors who run the camps preach that, through them, God can heal almost any ailment — especially ones thought to be essentially spiritual, like psychosis.

People who had been shackled at camps recalled in interviews the terror of being led into chains, but said much of the experience was a blur, dominated by psychologists and confusion. "Like, I woke up, I remember, and said, 'What's going on here? Why am I chained? Get me out of here,'" said Yawa Aguir, 31, a mother of seven who spent weeks at New Jerusalem, near Abidjan, Togo, several years ago.

At Jesus Is the Solution, Paul Nounouvi, a charismatic pastor, has built a retreat that includes an open-air church the size of an airplane hangar, cabins, an outdoor "wait" for residents with mental illnesses and, down the road, his spacious house.

At a recent revival, thousands of worshippers and pastors from around the region thronged the camp for a five-hour service.

Mr. Nounouvi said the camp had been in operation for 12 years and that praying for people with mental problems was a service he offered. Each family is required to provide food, clean-up and a chain. He said the camp currently held 175 people.

"Many of these people already have tried other things, like tradi-

ONLINE: MORE THAN PRAYERS For a micronation group seeking a new approach in Africa: nytimes.com/Search/chains/illness

"The problem didn't go away," he said. "We believe a spell has been cast on them. It can be witchcraft — this is the cause of the illness. When a person is reasonable again, acting normally, rationally, we say 'O.K., this person is healed.'"

A Frightened Family

Mr. Gbedjeha, the eldest of five, was his family's rock. When his younger brother Komlan quit trade school, Mr. Gbedjeha persuaded him to persist and to become a motorcycle mechanic. When an aunt was using his sisters as housekeepers, he made sure they were sent back home to the family village.

"He was so important to us, because he fought for us all the time," his sister Akossawa said.

So his siblings were deeply shaken when he began having serious mental problems in his early 30s. They gathered in their home village — Djagble, just outside the capital — with other relatives. The elders favored traditional healers who used herbal concoctions and spells to drive away evil spirits.

But Komlan and his sisters knew that their older brother, who had

studied to be a pastor, would not agree to traditional methods. So they suggested a compromise: Why not use his Christian faith in the service of recovery? The family had heard about Jesus Is the Solution, about 160 kilometers north. The elders agreed — but not Mr. Gbedjeha. "We had to capture him," Komlan said.

One night in December 2012, when Mr. Gbedjeha was at a sister's home, acting bizarrely, she dissolved a strong sedative into his soup, and he fell into a deep sleep. Komlan and two friends tied him up. At Jesus Is the Solution, the camp secretary registered Mr. Gbedjeha as a patient and told Komlan the family would be responsible for his care and feeding. The youngest sibling, Akossawa, who was unmarried, reluctantly agreed to mind him.

And there was one more requirement. "The chain," Komlan said. "He told us we had to buy our own chain."

At the camp, Mr. Gbedjeha was restless and intensely watchful. Once, in a rage, he threw urine at his sister. She slapped him. "Being in chains," she said, "he couldn't do anything more than stare back in anger." That is until he broke free.

The Demons Return

After weeks on the run, Mr. Gbedjeha arrived at his home village. An uncle spotted him, and he was welcomed back. But soon, Mr. Gbedjeha

moved back to Lomé, and the aggression and the demons returned.

This time, Komlan was determined to get his brother to a medical facility. In March, a mutual friend lured Mr. Gbedjeha into his car with the promise of a job. He and Komlan took Mr. Gbedjeha to a small Roman Catholic mental health clinic near the capital.

When they arrived, the clinic's director, Brother Emmanuel Aghedzinon, a psychiatric nurse, rushed over and demanded that Mr. Gbedjeha be inbound.

"This is a human being, and you treat him like that?" Brother Aghedzinon recalled saying. But he relented when Komlan said that Mr. Gbedjeha was too aggressive to consent to treatment.

After a week of daily drug treatment, Mr. Gbedjeha grew calmer, but by then, his family had run out of money. In April, he moved back to Lomé.

Mr. Gbedjeha recalled the trauma of being kidnapped and taken to the clinic and insisted he was sane. "I am not mad," he said. "Then he pulled some herbs from his pocket. 'This is to help me think clearly,' he explained, 'and keep the demons away.'"

Mr. Gbedjeha is now back at his home village, working with his uncle selling water. He has stabilized on medication. It is good to have him back, Komlan said, but "no one knows what is coming next."