

## WORLD TRENDS

## Mentally Ill in Africa, and Kept Chained in Camps

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than a promise of change, is 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 year, Liberia had just one practicing psychiatrist. Niger 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. Gbedjela 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 outfalls like Sissape, 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 coats in Persecution or evangelical demonstrations 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 psychosocial or other severe mental health problems land in prison. In Indonesia and other parts of Asia, restaurants — like shake-leser even cages — are also common. Survivors, 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 by the same as the global prevalence. That is at least a million people in countries where dementia 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 feelings is strong in this

Samuel Kpomavon contributed reporting.



REPORTING: THE NEW YORK TIMES

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 in camps revealed in interviews the terror of being led into chains, but said much of the experience was a bit dominated by psychics and confessions. "Like, I woke up, I remember, and said: 'What's going on here? Why am I chained?' Get me out of here," said Yawa Agye, 31, a mother of seven who spent weeks at Nee Jerusalem, near Adakpeme, Togo, several years ago.

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

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

"Many of these people already have tried other things like traditional healers, herbs and drugs, but

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For a video on one group seeking a new approach in Africa, visit [www.nytimes.com/2015/08/24/health/africa/mental-illness.html](http://www.nytimes.com/2015/08/24/health/africa/mental-illness.html).

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. Gbedjela, the eldest of five, was his family's rock. When his younger brother Komlan quit trade school, Mr. Gbedjela persuaded him to persist and to become a motorbike 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 Akossiva said.

So his siblings began having serious mental problems in their home village — Digble, 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

struggled 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. Gbedjela. "We had to capture him," Komlan said.

One night in December 2012, when Mr. Gbedjela was at a sister's home, acting bizarrely, she dissuaded a strong soldier to take his son, and he left in a deep sleep. Komlan and two friends tied him up. At Jesus Is the Solution, the camp secretary registered Mr. Gbedjela as a patient and told Komlan the family would be responsible for his care and feeding. The youngest sibling, Akossiva, who was unimpaired, reluctantly agreed to hand 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. Gbedjela was restless and intensely watchful. Once, in a rage, he threw a tin at his sister. She shrugged 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. Gbedjela arrived at his home village. An uncle spotted him, and he was welcomed back. But soon, Mr. Gbedjela

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 camps, where chains are used to control the most troubled.

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. Gbedjela into his car with the promise of a job. He and Komlan took Mr. Gbedjela to a small Roman Catholic mental health clinic near the capital.

When they arrived, the clinic's director, Brother Emmanuel Agbezidze, a psychiatrist nurse, rushed over and demanded that Mr. Gbedjela be unbound.

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

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

Mr. Gbedjela 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. Gbedjela is now back in 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."