

Evolution of mental health nursing in Rwanda: *the impact of the 1994 Genocide against the Tutsi*

IAPN

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01

Background-
Rwanda

02

Mental before the
Genocide against the
Tutsi

03

Consequences of the
Genocide against
the Tutsi

04

Mental Health Nursing in
the aftermath Genocide
against the Tutsi

Presentation outlines

1. Rwanda

- East African country of 26,338 square kilometer
- 13,2 million inhabitants
- 535.11 inhabitants per square kilometer in 2022
- The majority of the people live in rural areas and depend on subsistence farming for their livelihood

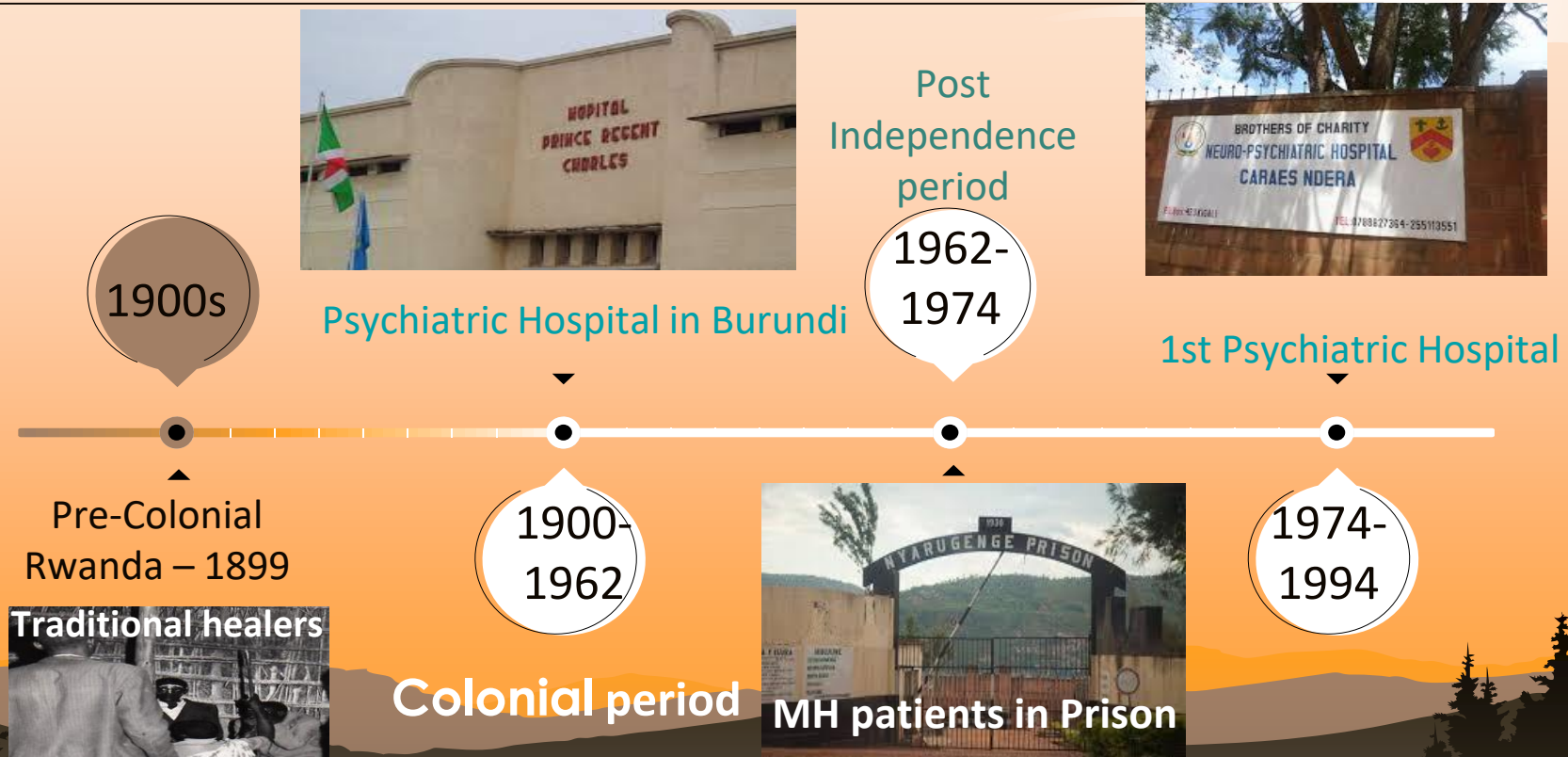
<https://www.statistics.gov.rw> › publication › Rwanda



The Land of a thousand hills and lakes



2. Mental Health Nursing before the Genocide against the Tutsi



Origin of Genocide against the Tutsi

German colonization

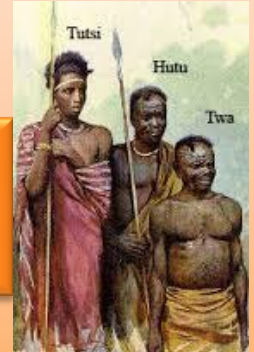
Rwanda before
colonization

Social classes

Belgium colonization

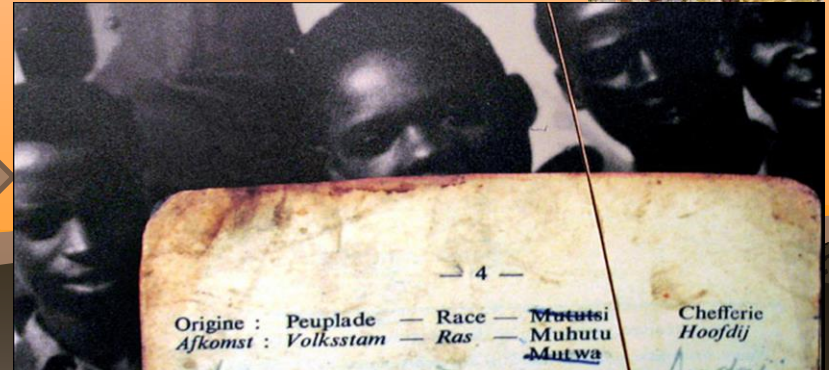


IDENTIFICATION
HUTU, TUTSI, TWA



In 1936: Belgians introduced an identity card which classified every Rwandan as Hutu, Tutsi or Twa

Prunier (1995); Semujanga (2003)





Ethnic Division

- Power
- Education

Rwanda Revolution 1959

Hutu seized power

Rwanda 1962

Tutsi exile

Rwanda 1973

Independence & 1st president

Rwanda 1990

2nd president coup

Exiled Tutsi are back by force

Social injustice and not turn back for exiled tutsi

Killing of Tutsi

Killing of Tutsi

Killing of Tutsi

Killing of Tutsi

Social
injustice
period

Anti **Tutsi** propaganda
through mass media

Militia training

7 April 1994

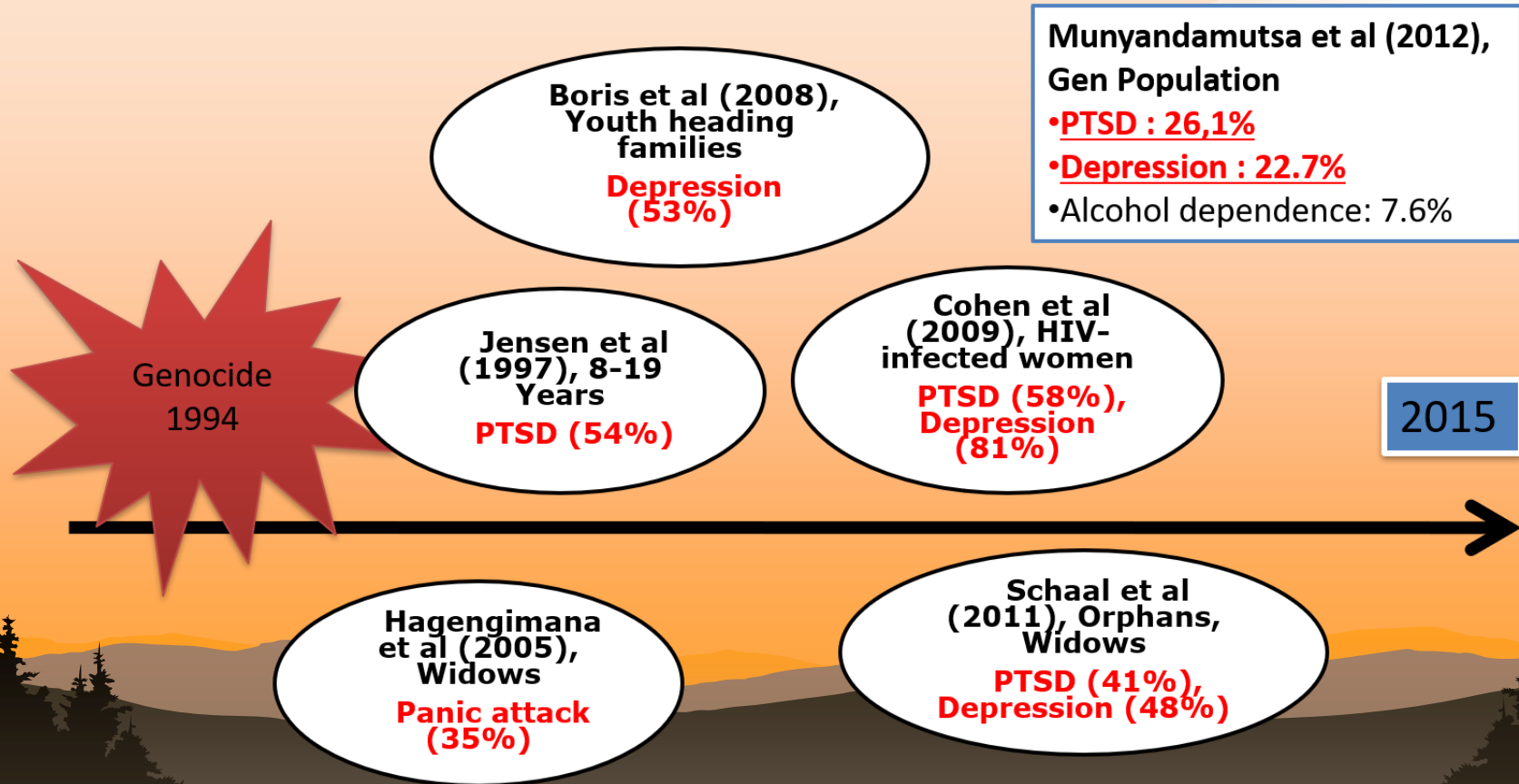
Genocide
against Tutsi
7 April 1994

What happened during the Genocide against the Tutsi?



Impact of genocide on mental health

During the past two decades, Mental Health become a Public health issue in Rwanda



Impact of genocide on mental health cont'd

- Non genocide survivors:
 - Major depressive episode (12.0%),
 - Panic disorder (8.1%)
 - Post-traumatic stress disorder (PTSD) (3.6%).
- Genocide survivors:
 - Major depressive episode (35.0%)
 - PTSD (27.9%) and
 - panic disorder (26.8%).
- Loss of job and extreme poverty due COVID-19 pandemic led to suicide

4. Mental Health professional in the aftermath Genocide against the Tutsi

	1994
Psychiatrists	0
Psychologists	0
Psychiatric nurses	0

Training local mental health resources , starting with Mental health Nurses

01

Training of mental health Nurses from 1998

02

Training of Clinical Psychologist from 1999

03

Training of Psychiatrist from 2013

Establishment of mental health Nursing



Due to unprecedented needs in the mental health sector, the Government of Rwanda, through the Ministry of Education and the University of Rwanda (former Kigali Health Institute) in 1998 initiated the first training in Mental health nursing

Journey of mental health nursing education

1998

2-year curriculum and first cohort of 21 students

2000

3- year program with 12 students

2000-2010

Study abroad for Bachelor, Master and PhD degree mainly in South Africa (University of Kwazulu Natal and western university Canada)

2023

Bachelor of mental health nursing

01

02

03

04

Currently, Rwanda counts more than 500 Registered mental health nurses

Contribution of mental health nurses

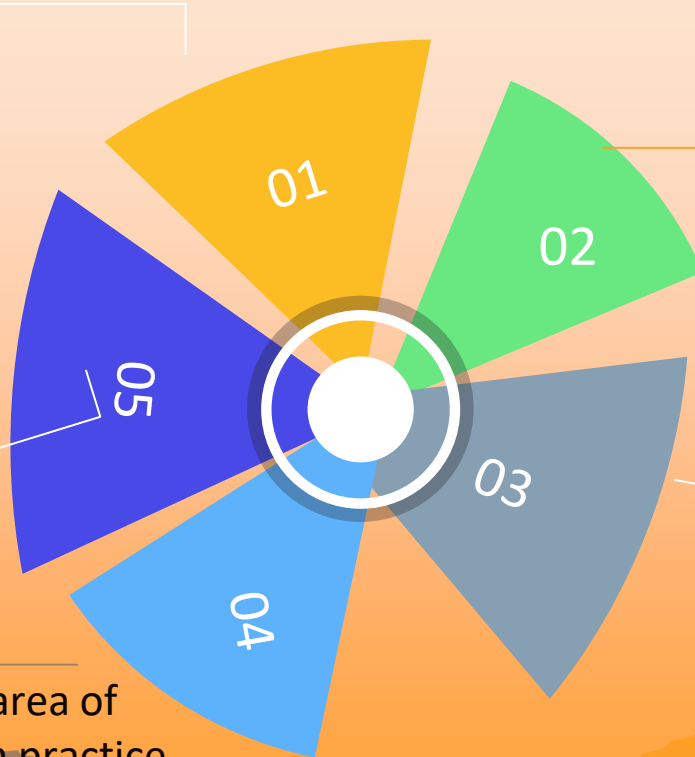
Leadership positions at the Ministry of Health, Professional bodies

Clinical setting from Referral, Districts and Health centers

Contributing to Community based intervention

Driving the **education** of nurses in the Universities

Contribute in the area of **research** to inform practice and policies



Contribution to the Education sector

- Mental health nurses play a key role in designing and reviewing curricula for nurses:
 - with a specialized component for mental health nurses that have to act as specialists and
 - key competences for general nurses that equip them with skills for first aid in mental health.
 - develop manual for continuous professional development for graduate nurses
- Mental health nurses contribute in the area of research to inform practice

Clinical setting

- Mental Health Nurses (MHNs) are key mental health professionals in the Rwandan Health system
- MHN played a crucial role in contributing to decentralisation of mental health services into PHC (First to initiate MH services at DH and HCs)
- Deployed initially from the referral to peripheral services

Leadership position

- Mental health nurses are key leaders in Mental Health Division within the Ministry of Health, they influence the policy of mental health in the area of drug abuse, community rehabilitation
- Rwanda nursing council for Nurses and Midwives is led by mental health nurses,
- Their contribution in tailoring the scope of practice where the competences of mental health nurses meet the needs of the Rwandan community is commendable

Civil society

- Creation of **Rwandan Society of Psychiatric-Mental Health Nurses (RSPN)**
- The RSPN was established by 35 founding members on 3rd December 2016,
- Provisional licence was granted on 21/12/2018 and a final licence on 07/01/2020. It has up to date 73 active members
- RSPN's mission is to strive for mental health promotion, disease prevention and professional development
 - More information on <https://rspn.rw>

Conclusion

- Effects of genocide against the Tutsis range from trauma and other comorbid disorders, disrupted family and communities, the fact that it was committed by Rwandans against Rwandans make the journey of healing more complex.
 - The fact that it was stopped by Rwandan shows that the healing journey can be very long but it is still possible.
- There are clear indications of a transgenerational trauma
- As mental health nurses we have to work closely with other health professionals to care for those who are in need, promote mental health and be proactive, and innovative to set free the next generations from trauma

Thank you

