# Debunking and Demystifying Mental Health in the Context of African World View Today

**Bwire J. Peter**
**Kenyatta University**

*Abstract*

*Mental Health as a condition has not been fully demystified and elaborated thoroughly. In Africa, it is attributed to either curses, spiritual causes, witchcraft or some other cause due to their traditional worldview or belief systems, thus how they interpret phenomena, incidences, events and diseases included. This has led to rampant mental health cases as high as 25% of total population compared to other parts of the world. It could be factual that witchcraft and curses exist in Africa, but they are not the only causes of mental health. Proper understanding to expose the gaps is overdue. Therefore this study set out to debunk and demystify mental health by assessing reasons for limiting mental health to worldview causes and analyzing scientific and possible other causes/characteristics in Africa, prevention and healing of mental health. Mitigation of African world causes, interpretations and challenges provided multifaceted solutions to mental health today, such as clinical, psychological, cultural, and African worldview and beliefs notwithstanding. The purpose of this study is to establish why mental health is still attributed to curses and witchcraft despite modern scientific medical ways of treatment and why mental health is rampant and access to treatment not effective in Africa? The study used qualitative approaches to analyze library information: to collect and describe data, summarize, drew conclusions and recommendations made. The study found out that mental health is only skewed and shrouded in mystery and that it is a health condition like any other and not caused by curses or evil spirits, or witchcraft. It can be treated using conventional and other medical measures. Besides demystification and debunking, the revitalization of traditional methods alongside scientifically proven and conventional approaches to mental health is highly recommended in this paper.*

***Key Words:*** *Worldview, Debunking, Demystifying, Curses, Witchcraft, Mitigations*

## 1.0    Introduction

Mental health is a significant health concern globally, with 25% of Kenya's population experiencing a mental health problem at some point in their lives. Mental health refers to a state of well-being in which individuals can cope with the normal stress of life, work productively, and contribute to their communities, and not merely the absence of disease or infirmity.  Mental illness, on the other hand, refers to a range of conditions that affect an individual's mood, thoughts, and behavior (American Psychiatric Association, 2013). Mental illness is often stigmatized, and individuals with mental health problems are often discriminated against, including being denied access to healthcare and other essential services. There is also a lack of awareness and understanding of mental illness, which perpetuates the stigma surrounding mental health problems (Njenga et al., 2020).

Mental health, which is contemporary and a crucial concern worldwide has been discussed in several accounts, especially from the Western worldview, but not much from an African perspective. Africa as a developing continent deserves thorough health investigation because of the myriad challenges it faces, unlike developed countries. Poverty and related vagaries of unemployment, food insecurity, and rampant diseases, lead to the unwell-being of many people. Further, educational backwardness and some traditional and religious beliefs and practices (world view) compound negative health issues in Africa such that if one has a mental disorder is thought to be either cursed, bewitched or doesn't need to go to hospital because the gods will heal him/her. Health knowledge and belief systems in Africa raise questions but also open up analysis on many issues related to how health and illness are understood by communities,  (Falola, 2008),

There are significant gaps and challenges in mental health care in Africa, including a shortage of mental health professionals, a lack of funding for mental health services, and inadequate facilities. Mental health services are often centralized in urban areas, making it difficult for individuals in rural communities to access care. Additionally, Kenya has a shortage of mental health professionals, with only one psychiatrist per 500,000 people (World Health Organization, 2021).

With this backdrop and henceforth, the conceptualization of the associated mental health concepts including well-being and ill health need to be explored in an African worldview and traditional systems, among others. This paper provides in-depth empirical, scientific data accounts of mental

health in the context of the African worldview. Further elaboration and clarity can be adduced from the following statement of the problem and the subsequent set out objectives;

## 1.1 Statement of the Problem

Mental disorders (MD) or illnesses is a condition like any other says (NCBI, 2023). The main research questions that this study set out to unravel are; why is mental health matters shrouded in mystery and talked about in low tones in some African world views as if it is an abomination or a crime to suffer from mental illness? Why in Africa, MD conditions are attributed to outdated skewed interpretations like curses, spiritual causes, witchcraft or some other cause in the 21st Century civilization with modern ways of looking at mental health. Could it be due to their traditional world view or belief systems, and how Africans in their different cultures interpret phenomena, incidences, events and diseases? What are the gaps and medical challenges in mental health in Africa? The rampant mental health cases which are very high (between 25% - 30%) of total population compared to other parts of the world are astounding (WHO, 2023). It could be factual that witchcraft and curses exist in Africa, but they are not the only causes of mental health. That is why to establish this daunting scenario this study set out to debunk and demystify mental health by assessing reasons for limiting mental health to world view causes, and analyzing scientific and possible other causes/characteristics in Africa, and to discuss acceptable alternative and scientific prevention and healing measures of mental health from global and WHO perspectives.

## 1.2 Objectives of the study

The following four objectives emanates from the literature review analyzed in this study and are vital for a coherence and consistent flow of discussions in this study: 1. African world view and mental health. 2. Various causes and characteristics of mental health in Africa 3. Debunking and demystifying mental health in Africa 4. Prevention and healing of mental disorders and illnesses

## 1.3 Methodology

The study was a library based study and not field study, hence descriptive survey design was employed to select relevant data/material sources from but not limited to; archives, manuals, historical literature, institutional records for discussions and analysis using qualitative methods to obtain study themes using content and discourse analysis.

Therefore a systematic literature review was done using electronic databases, citation tracking, snowball searching as well as recommendations from experts. Exclusion factors included studies not done in English language; those not focused on or within the themes of mental health interventions.

 It was guided by four main objectives that runs across the entire work thematically as the main focus of the study; to examine ways of Debunking and demystifying mental health in Africa, to identify Various causes and characteristics of mental health in Africa, to discuss African world view and mental health and to analyze Prevention and healing of mental disorders and illnesses. The objectives guided in presenting data and drawing findings, summaries and conclusions.

## 2.0    Literature Review

This section provides data on debunking and demystifying mental health, explores African worldview and mental health, analyzes various causes and characteristics, and prevention, the healing of mental health disorders and illnesses. The section aims to assess the existing information and misinformation on the subject matter for sound compression of facts while filtering through and including relevant material in the discussions.
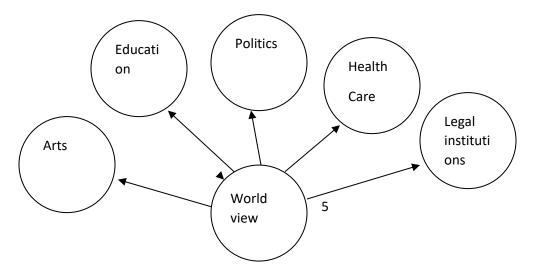
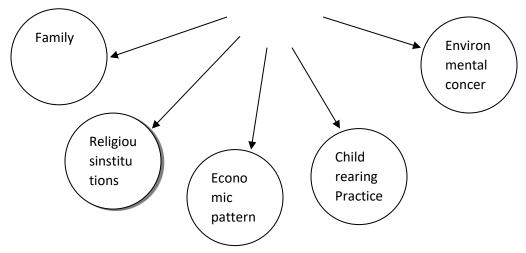## 2.1    African World View and Mental Health

The African worldview view which entails interpretation and understanding of health, is broad encompassing the physical. Emotional, psychological and spiritual domain. This is further enshrined in their culture: the characteristics and knowledge of groups of peoples including religion, social life, economic life, etc. According to Falola, (2008), "health care in Sub-Sahara Africa is an issue of utmost importance in the twenty first Century" due to emerging diseases, pandemics and changing vagaries. In this diverse context, different communities have their understanding of health though there is a thin line that cuts across most cultures. According to Nelson Tamara (2022), African societies believe that a supernatural environment causes illness. These forces include but are not limited to two divisions: supernatural causes such as misfortunes attributed to the wrath of gods or God, sorcery, witches, the actions of malevolent spirits, and failure to observe taboos among others. Likewise, ancestors were linked to good or bad health explanations, believed to cause or prevent sicknesses particularly mental disorders commonly known as madness.

Causes of such illness was because of failure to observe traditions like burial rituals could upset ancestors, attracting curses, misfortunes to non-compliant descendants. Breaking water, forest, sacred places like forests and shrines could cause mental illness. In the twenty first Century due to civilizations and scientific interventions in medicine and missionary religions like Christianity and Islam in Africa, elite members of the society have turned to natural causes and treatment of illnesses compared to diehard traditional conservatists (Falola, 2008),

What is African world view? A world view is a perceptual framework, the way Africans see things, perceive, understand, explain, interpret and translate phenomena, historical events, incidents, mysteries etc. Holmes (1985).  A world view is also a set of presuppositions or assumptions which we hold consciously or subconsciously about the basic makeup of our world. It is first of all an interpretation of the world and second, an application of this view to life. For example, if an owl landed on a person's house or merely cried in the village, this was a sign of bad omen. For Africans it was not superstition, they believed in them and such interpretations had causes and effects. As such Europeans, Japanese, Americans have their different world views. But due to cultural diffusion, there might be similarities. Thus the interface between African world view and mental health is an interlocking one in the sense that how we see and interpret our illnesses affects the diagnosis of the causes of it. Before one seeks the help of mental experts, the first step is to apply any concoction as self-treatment or seek the nearest traditional medicine personnel whose explanation is informed by contextual world view knowledge. This world view sphere can be explained in fig.2.1 below;

**Figure 2.1. Illustrates African world view, cultural patterns which can be integrated in deciphering mental health.**

Family

Environ mental concer

Religiou sinstitu tions

Econo mic pattern

Child rearing Practice

**Source: own adaptation**

These world view patterns determines how mental health can be understood holistically in terms of causes, prevention and treatment. This content also formed the centrality of the world view but giving different strands of knowledge emanating from the same Society. Thus due to cultural dynamisms, there wasn't just one worldview but variant yet coherent and tied together. Even if some of the mental ill health issues are caused by traditional curses or witchcraft, it should be traced from a number of other related origins. For instances, one is bewitched to retard his economic progress so that one's education is cut short or his family dis-integrates when the spouse runs away and the home collapses because of madness. Some curses are one's own cause and at times because of envy, jealousy or unfounded hatred by relatives. Therefore, Some of these world view provides questions and gives answers from a faith based but cultural perspective as well:

**Who Am I?** This question seeks to give answers to the originality of humanity and his nature, illnesses, task, and purpose in the world

**Where Am I?** This world view question seeks to understand the nature of the world and the universe where we live.

**What is wrong in the world?** Or simply put, what is the obstacle to attaining fulfillment?

**What is the remedy**? Or how is it possible to overcome hindrances to my fulfillment or how do I find salvation?

Generally these are the pertinent questions that comprise the needs of an African person even today that mental health ought to address. Answers to these questions settle the African person and s/he begins to see reality in some sensible pattern of the big picture beyond parochialism. This is because:

1. World view explains how and why things got to be as they are and how and why they continue or change. It embodies for a people, the basic assumptions concerning ultimate things on which they base their lives.
2. The worldview is evaluational and has a judging and validating function. The basic institutions, values and goals of a society are ethnocentrically evaluated as best and therefore, sanctioned by the world view of their culture.
3. The worldview provides a psychological reinforcement for people in times of emotions and anxiety (death, terminal illnesses like HIV and Aids, and mental health). It is to one's conceptual system that one turns for the encouragement to continue or the stimulus to take other action.
4. Some tendencies of Western systems were packed and rapped within their cultural matrix of worldview and civilization and forced onto Africans for their whites' good- to serve them. This has created confusion, and conflict between the inner conscience and praxis of an African person. He is intelligent with all Western paraphernalia of security but always turns to African experts for protection, revenge, and security from witches, magicians, etc.?
5. The African worldview gives the Africans a sense of self-examination without which they perish-life without self-examination is not worth living.

Through debunking and demystification, Africans then should reincarnate or reclaim only relevant knowledge from some of the African experts who are diminishing. This rich heritage still has to be integrated with conventional ways of understanding mental health because world views are dynamic and not static. To be stuck in the past years is to follow a skewed and narrow parochial way of doing things in the present civilization.

## 2.2 Various Causes and Characteristics of Mental Health in Africa Today

Generally in Africa, Socio-economic issues are the major drivers to mental health. These include but not limited to: parenting, mostly abusive or by single parent or absent parents. Job loss or lack of it could immerse a person in mental torture resulting in disorders, poor nutrition and food security causing anxiety and depression, causes and repercussions of the same in marriage breakups, and gender based violence, deaths, child neglect are killer traps to mental disorders, (Pfeiffer, 2022).

But when it comes to categorization from an Afrocentric perspective, four major divisions emerge as causes of the worldview patterns in Fig 2.1: Among the Luhya community i). Supernatural or spiritual causes-disobedience and punishment from ancestors, witchcraft, sorcery, jealous, vengeful spirits like those of past murder victims- in Africa and by the extent among some Luhya sub-tribes people don't just die. Therefore, certain rituals accompany burial rites where some revengeful spirits of the dead are invoked to haunt the killers of the deceased person. Thus, these vengeful spirits would in most cases attack a person's mental capability by causing severe disorders. The other scenario is that of marital infidelity. It was believed that adultery in marriage could cause sickness and even death of a child, or madness of the affected etc. In some instances, one could be affected if he/she encountered evil spells exorcised from an infected victim. Such spirits or powers *emisambwa/ebihieno* would be sent away or dumped on the road in the wee hours of the day so that whoever meets such first would be the next trap. ii) Socio-cultural factors like unethical conduct like not abiding by mourning rites and regulations. Among the Luhya community if one cohabits with a spouse during the mourning period of a parent automatically you became a candidate for a mental case Iii). Physical factors such as substance abuse, body injuries, changes in seasons, etc. Concisely all these causes culminated in mental problems (Sinethemba. &. Ross. E. 2002).

What does these scenarios of causes for mental illness portend for in Africa? In his analysis of effects and opportunities: Lukoye (2020) contends that among the youth, 1 out of 4 has a mental health problem. His work casts causes beyond cultural indicators; Hard drugs, substance abuse and other triggers can lead to the following signs and characteristics exhibition especially among young people: change in behavior, violent, careless indulgence in illicit sexual intercourse, heavy

drinking, tendency to violence due to hypertensive conditions, angry, negligence of responsibility, catatonic stupor, lose or increased appetite, laziness and procrastination, etc.

From a theological point of view either from Christianity or African traditional religions, God is the cause and healer of all illnesses. According to Piper and Taylor. J. (2006), God uses people's suffering for his glory because it creates dependence on Him. 2 Corinthians 4; 17-18 adds that earthly suffering cannot be compared to God's glory in heaven. It is the way of life. We note that besides Spiritism where we attribute things to the spiritual world-beyond humanity, spirituality is as well woven into mental health issues where our relationship with God or gods interplays our mental well-being or illness depending on the nature of that relationship. Sin against God culminates in suffering while purity before Him leads to good health. This study set out to debunk and demystify mental health by assessing reasons for limiting mental health to worldview causes and analyzing scientific and possibly other causes/characteristics in Africa, among other objectives.

## 2.3    Debunking and Demystifying Mental Health in Africa

Given the above scenario of the causes of mental ill health in Africa, Debunking and demystifying mental health needs clarity beyond ordinary understanding thus the following: adequate understanding of the condition including the causes, characteristics, limitations to health and wellness, scientific diagnosis and treatment. This is because proper debunking for mental health in Africa has to do with explaining, exposing, and recasting traditional worldview falsehoods (Oxford Dictionary). It, therefore, follows demystifying skewed contextual comprehensions with a view to elaborating and opening a wider scope of scientific empirical examination view. To achieve this a host of measures as ways of debunking are required: the use of scientific approaches to early diagnosis and treatment, proper spiritual evaluation of African spirituality and traditional medicines, and availability and access to mental health facilities. Using such an approach, health should mean not only well-being but all disorders and their variant causes as well. The meaning should take care of contextual understanding as well as the conventional wide perspective of it. Establishing what mental health means to Africans and from the global community according to world health organization-WHO.

Demystification of mental health should transcend African world so that a myriad of possible causes are addressed. According to Sinethemb and Ross. (2002), Mental illness can be divided into four causes or can have a significant impact on a person's life, including Emotional effects: - Feelings of sadness, anxiety, hopelessness, and other negative emotions. Cognitive effects: - which affect a person's ability to think, concentrate, and make correct decisions, Behavioral effects: - which Cause changes in a person's behavior, such as social withdrawal, aggression, or self-harm. These approaches (demystifies) simplify mental illness for easier understanding, (Oxford Dictionary) beyond the traditional view that attributes it to curses, witches and spiritual causes that are only whispered in low tones it is perceived as a dreadful disease and hence left to traditional experts like medicine men/women and herbalists to handle.

Debunking and demystification of mental health in Africa aims at developing a sound mind or complete physical, spiritual or holistic wellness. But above all diagnosing all rounded causes, characteristics and prevention and treatment (WHO, 2022).

## 2.4    Prevention and Healing of Mental Disorders and Illnesses

The COVID-19 pandemic and a variety of health hazards have exacerbated mental health problems in Africa, with a significant increase in anxiety and depression reported. The pandemic has also led to disruptions in mental health services and a shortage of mental health professionals. However, the pandemic has also presented an opportunity for the government to invest more in mental health services and to address the stigma surrounding mental illness (Wambua et al., 2021). Conventional remedies and African traditional approaches differ in some causes but agree on some depending on the perceived cause and level of religious inclination and education. With a view to debunking this study, a multifaceted approach is hereby suggested: According to African world view as seen in sections 2.1 and 2.2, a number of preventive and treatment methodologies were applied;

**First, prevention measures.**
First mitigation was to prevention.  Spiritual protection was sort through charms, amulets, powder smeared or certain herbs won. This was not only applied to the individual but at times to the entire community members because African believe that sickness of an individual is sickness to the whole community. It should be noted that African world view in its totality; religion, Socio-economic and spiritual life, customs, and other traditional beliefs and practices contributed to

interpretation of health and wellness. (Mbwayo.A.W, 2012). But traditional beliefs and practices could be outdated, cultic and hence the need for integration of scientific explanations and solutions.

Therefore, some effective prevention strategies for mental health disorders may include: i) Primary prevention: This approach focuses on stopping mental health problems before they start. It includes according to Kanyandago (1994), addressing various factors that influence mental health, such as personal history, social circumstances, and lifestyle choices. Workaholics or doing the same task for long hours at the same place can cause depression. Examples of primary prevention strategies include: - Promoting positive mental health through education and awareness campaigns, get rest, take off from your busy schedules. - Creating supportive environments that foster mental well-being, such as safe and inclusive communities. - Providing access to quality education, employment, and housing, which are essential for overall well-being. See Kanyandago (1994), (Mbwayo.A.W, 2012):

i). Secondary prevention: This approach aims to support individuals at higher risk of experiencing mental health problems. It includes early identification and intervention to prevent the development of more severe conditions. Examples of secondary prevention strategies include: - Screening programs to identify individuals at risk of mental health disorders - Providing targeted interventions, such as therapy or support groups, for individuals with early signs of mental health problems.

ii). Tertiary prevention: This approach focuses on minimizing the impact of existing mental health disorders and promoting recovery. Examples of tertiary prevention strategies include: - Access to appropriate treatment, such as medication and therapy, for individuals with diagnosed mental health disorders - Supportive services, such as housing assistance or vocational training, to help individuals with mental health disorders live fulfilling lives in the community.

iii). Promoting protective factors and resilience: -Building protective factors, such as strong social support networks and healthy coping mechanisms, can help prevent the onset of mental health disorders. Resilience, or the ability to bounce back from challenges, is also crucial for maintaining good mental health such as. -Early intervention: Early identification and treatment of mental health problems can help prevent them from becoming more severe. This is especially important for

children and adolescents, as studies show that half of those who will develop mental health disorders show symptoms by age.

iv) Integration of mental health into various settings:-Incorporating mental health promotion and prevention strategies into schools, workplaces, and healthcare settings can help reach a broader population and reduce the stigma associated with mental illness.

vi). Addressing substance use and mental health disorders: -Substance use and mental health disorders often co-occur, and addressing both issues simultaneously can lead to better outcomes. Prevention strategies for substance use disorders, such as education and support, can also help prevent the development of mental health disorders.

**Secondly treatment of mental disorders;** from the conventional scientific view, Treatment for mental illness in Africa today is variant and should include both traditional and scientific ways such as medication, psychotherapy, and community-based interventions. Consulting the spirits through divination to identify the cause of disease and whether the sick broke any taboo or bewitched. In either of the causes, gods and spirits would be appeased through sacrifice, prayers, and fines. Herbalists and traditional medicine men and women would be consulted for herbal concoctions or dispel spiritual causes (Falola, 2008). Others included exorcism for those who were possessed by evil spirits or demons to expel them. Pouring of libations ritualistically through invocations by inviting ancestors, supplications or where they were requested before libations and drinks were poured. This study is a clarion call to cast nets wider beyond continental worldviews due to the plurality of the society.

For example, mitigation of poverty, which is one of the main contributors and triggers to inadequate mental health, in general, must be addressed in the following ways: put in place politics and systems that can address equal distribution of resources, particularly free education. Poverty plays a pivotal role in religious matters as in beliefs and practices therefore, either regulation or re-evaluation of religious institutions is mandatory to address cultism. Recently, we have experienced massacres of believers due to cultic practices and beliefs in Kenya Shakahola deaths and elsewhere in Africa. In such incidences, believers' rationality is blindfolded through false prophetic promises to an extent where they denounce the world or every material possession for the awaiting glory in heaven. Ignorance, hoodwinking and pacification takes over of their rational

being. Debunking also should see to it that all stakeholders' approaches are engaged: Psychologists, sociologists, Psychiatrists, priests and sound spiritual means like counseling and discipleship. Church leadership should act as guardians of faith in discipleship of faithful to avert self-pity deaths –Hosea 4;6 which warns of death due to lack of knowledge. For faith based individuals, healing calls for forgiveness and loving of those perpetrators who have sinned against you. Forgive others to allow self-healing and forgiveness. Carrying other people's burdens wears you down and brings low self-esteem, neglect and mental suffering. See (Kanyandago, 1994),

However, there are significant barriers to accessing treatment, including the cost of medication, shortage of mental health professionals, and stigma surrounding mental illness. Community-based interventions, including support groups and community outreach programs which are particularly effective in addressing mental health problems in rural areas (World Health Organization, 2021).

## 3.0    Findings and Discussions of the Study

First the study found out that mental health perspective, defining and understanding is skewed and limiting only to its contextual underpinnings: A world view is a perceptual framework, the way Africans see things, perceive, understand, explain, interpret and translate phenomena, historical events, incidents, mysteries etc. Holmes (1985).  A world view is also a set of presuppositions or assumptions which we hold consciously or subconsciously about the basic makeup of our world. This perceptions is rich enough but should be understood in a broad way since world view is dynamic hence fitting even in the resent and not stuck in the past beliefs. It was found out that mental health has gaps of knowledge and a challenge to human wellness with over 25% of African population affected.

On the question of causes and characteristics of mental health in objective two, the study found out that there are variant causes beyond the African world view perceptions of curses, witchcraft and Spiritism to a host of many triggers including theological claims of divine causes, Socio-economic, political, psychological, physical, spiritual among others. Signs and characteristics of mental illness are but not limited to the following: change in behavior, violent, careless indulgence in illicit sexual intercourse, heavy drinking, and tendency to violence due to hypertensive

conditions, angry, negligence of responsibility, catatonic stupor etc. stigmatization increases the above experiences to hypertensive levels and even depression, then homicide.

Findings on Debunking and demystifying approaches discussed herein suggested that a holistic and inclusive approach should be adopted in prevention and treatment of mental health; traditional and empirical scientific methods; prevention by dealing with all forms of triggers whether social, economic, psychological or spiritual before they happen. This by putting mechanisms in terms of policy, resources mobilization, availability and access to mental health facilities among others. Proper identification and diagnosis-scientifically or and spiritually by qualified approved religious institutions and experts such as psychiatrists, psychologists, medical doctors, counselors, priests among others. The study also found out that affected persons should be encouraged to open up because secrecy and mystery kills where treatment is delayed: stigma, self-pit and unworthiness, hopelessness, among other peril discourses of life termination.

On prevention and treatment of mental health as per objective four, the study found out that world view approaches are not enough: (consulting the spirits through divination to identify the cause of disease and whether the sick broke any taboo or bewitched?  Appeasing the ancestors and spirits through sacrifice, prayers, and fines, use of Herbalists and traditional medicine men and women, .exorcism for those who were possessed by evil spirits or demons to expel them, Pouring of libations ritualistically through invocations by inviting ancestors, supplications or prevention by spiritual protection through charms, and amulets), though could still be sort as alternatives in spiritual matters.

The study confirmed that Medicine and Healing: should not only aim at physical sickness but also sin and other dehumanizing conditions of spirituality. This was called the holistic approach Kanyandago (1994). African traditional healing and approaches to illness can be re-evaluated. For example, the African medicines that Christians always revert to secretly, is not devilish or witchcraft. Some Pentecostal churches are applying spiritual healing and a holistic approach to health. They have realized that the struggle against sickness goes beyond the physical contentions of the word. In the spiritual realm, powers and forces that deny the sustenance and goodness of God must be alienated through God's super spirits.

Healing should include overcoming all forces in the following areas: Broken relationships, sickness with the witchcraft or sorcery- related causes, problems in the work place, joblessness,

economic and financial problems. Faith should be involved and believed to heal sickness though western medicine should never be ignored. People with healing gifts from God should be identified and allowed to exercise their powers as intermediaries between God and the people. Their office would include counselors, psychotherapists, exorcists, ritualists, and certain priests. They have psychic gifts of intuition, telepathy and ability to communicate with God through the Holy Spirit. See Kanyandago (1994), above all it was noted that God is the cause and healer of human diseases and problems

## 4.0    Conclusions and Recommendations

In the above foregoing findings and discussions section three, one can summarize that sickness of an individual in Africa is suffering or sickness to the entire community hence part of the solutions to ill mental health lays in strengthening mental health systems beyond limited world views which is the very foundation of life:

On the question of contextual worldview interpretations, we hereby conclude and recommend that Sensitization of communities to create awareness beyond outdated cultural ways, beliefs and practices of looking at mental health required. We would emphasize that not everything world view is archaic hence this study calls for integration of traditional and modern scientific ways as per the discussions herein. This will help to de-criminalize mental illness because it is not an abomination to be mentally unwell. There are several triggers beyond traditional understandings and scientific ways which should be employed for early detection and identification of symptoms, dealing with stigma, availability of care centers to offer free services by NGOs and churches and to turn around the economy. World view should be a pointer to search the past, to address the present and address the future but should never be an end in itself.

Having illumined on the various causes and characteristics of mental ill health, we conclude that mental health is a significant challenge in Africa, with significant gaps in mental health services and a lack of understanding and awareness of mental illness due to contextual skewed and parochial world view and related factors. Therefore we suggest that Debunking and demystification of mental health helps not only in understanding but identifies gaps and opens up the continent for awareness and solution oriented approaches perhaps beyond scope of this work- i.e. evaluation of the social, political, cultural ills bedeviling entire health systems in Africa relative

to western countries. It was noted that causes and characteristics of mental health transcends African world view interpretations and conventional approaches should be sort to bring healing in Africa.

As such addressing mental health requires a multi-faceted approach, including increasing funding for mental health services, promoting mental health awareness and understanding, and addressing the stigma surrounding mental illness. Community-based interventions and telehealth services are also promising ways to increase access to mental health care in rural areas (Wambua et al., 2021)..

Gaps and challenges facing mental health in Africa are motivators for this study and future works should look into the following: analysis of poverty, ignorance, economic. Political, Spiritism and cultism factors as triggers of mental health. Proactive policies are missing hence most approaches towards mental health in Africa are crisis and firefighting than preventive in nature. Political leadership seems a deterrent of wellness and a determinant to disease severity through political instability, civil wars and patronage of natural resources. Politicization of health leads to loss of lives, inaccessibility and unavailability of medical systems.

Finally, the study has successfully discussed the Debunking and demystifying mental health in Africa, explored African world view and mental health, and provided various causes and characteristics of mental health in Africa with a view to establishing new approaches in the Prevention and healing of mental disorders and illnesses today. Therefore, mental health interventions should be anchored at every stage of life cycle of an individual and this includes but not limited to provisions of social amenities in health, education and all the basic needs for a health body, mind and spirit. These are some of the resources prerequisite for stable mental health and maintenance of psycho-socio-economic, emotional analysis of the cognitive, Psychomotor etc.

**References**

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5th Ed.). Arlington, VS: American Psychiatric Association.

Holmes. A.F. (1985). *Contours of a world view*. Grand Rapids. Michigan. WM. B. Eerdmans Publishing Kanyandago in Waruta, et al. (e.ds).1994. *Pastoral Care in African Christianity: challenging Essays in pastoral     Theology*. Nairobi. Acton Publishers. P. 45

Lukoye A, David Ndetei, and Charles S. Mwenda. (2020) *Mental health in Kenya: Whose problem? A situational analysis* https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4392984/ retrieved, 8/10/2023.

Nelson, T., Cardemil, E. V., Overstreet, N. M., Hunter, C. D., & Woods-Giscombé, C. L. (2022). *Association between superwoman schema, depression, and resilience: The mediating role of social   isolation and gendered racial centrality. Cultural Diversity and Ethnic Minority Psychology.* Advance online publication. https://doi.org/10.1037/cdp0000533

NCBI (2023) *The National Center for Biotechnology Information advances science and health by providing access to biomedical and genomic information*. Washington. DC NIH

Njenga, F. G., Ikwatha, C. N., Mutiso, V. N., & Jenkins, R. (2020). *Mental health policy development in Kenya: Introducing the mental health gap action programme*. African Journal of Psychiatry, 23(3), 1-8.

Pfeiffer. J. (2022).*Medical anthropology quarterly*. AAACWRU.

Piper. & Taylor. J. (2006). *Suffering and sovereignty of God*. Wheaton Illinois. CROSSWAY BOOKS.

Mbwayo.A.W. (2012). *Traditional healers and provision of mental health*. Nairobi. Nairobi University Press,

Wambua, I. N., Mboco, M. W., & Wambua, E. M. (2021). *Mental health during COVID-19 Pandemic in Kenya: Challenges and opportunities*. Journal of Public Health Research, 10(1), 1-6

World Health Organization. (2021). *Mental health in Kenya*. Retrieved from
    https://www.who.int/mental_health/kenya/en/.