

**KENYA MEDICAL RESEARCH INSTITUTE**



*In Search of Better Health*

# **EVIDENCE BRIEF**

**Mental Health,  
Non Communicable Diseases  
and Nutrition,  
KASH 2022**

## KEY MESSAGES

- **Non-communicable diseases are key determinants of mental health illnesses which occur with related stigma and discrimination despite Kenya having inadequate investment in this area**
- **Dietary changes in Kenya to adopt Western diets that have more saturated fat, less fibre, more sugar and salt have resulted in the increased burden of NCDs.**
- **Healthy food plays a key role in dietary behavior and socio-economic disparities on accessibility and affordability of healthy and nutritious food impacts on the nutritional status, disease burden and health outcomes.**
- **The burden of hypertension in adults living in urban informal settlements of Kenya is high whilst knowledge on control and management measures is low.**
- **Knowledge on risk factors for cancer is low and high proportions of patients present themselves at the health facility when the disease has progressed to stage 3 or 4 complaining of other ailments.**

## INTRODUCTION

Epidemiological studies have found significant associations between noncommunicable diseases and common mental disorders, including cardiovascular diseases <sup>1</sup>. One in five (5) patients with coronary artery disease or heart failure is depressed and one in three (3) stroke survivors is depressed after stroke <sup>2</sup>. Diabetes and cancer have also been linked with mental disorder <sup>3</sup>.

A WHO report ranked Kenya fifth among African countries with elevated depression cases, with global statistics indicating that approximately two million people suffer from depression (WHO, 2017). One out of four (4) persons who seek healthcare in Kenya have a mental health condition <sup>4</sup>, having the World Population Review place Kenya at 114 of 175 countries with escalated suicidal rates at 6.5 per 100,000 persons <sup>5</sup>. It is estimated that up to 25% of outpatients and up to 40% of in-patients in health facilities suffer from mental conditions (KNCHR, 2011) and this in turn is impacted by the non-communicable diseases (NCDs) factor. Non-communicable diseases have emerged as conditions of great public health concern in Kenya accounting for 39% of deaths annually. There is a link between mental disorders and non-communicable diseases which often coexist <sup>1</sup> and an overlap between their risk factors <sup>3</sup>.

## OBJECTIVE

To provide a rapid evidence summary that highlights the link between mental health issues, non-communicable diseases and nutrition, so as to give valuable insights on the areas of improvement in Kenya.

## SETTING

The three (3) abstracts presented results from selected regions in Kenya; Nairobi and Western parts of Kenya

## RESULTS:

This rapid review looks at the three (3) abstracts, a plenary session and a symposium in which findings of studies on mental health, non-communicable diseases, and nutrition were presented and attempts to show the linkage.

| Author                     | Title of Presentation   | Key issues / findings  | Recommendation(s)  |
|----------------------------|---|--|--|
| <b>Njenga F., 2022</b>     | Mental Health and other non-communicable diseases (No health without mental health).  | Mortality and Depression among people with mental health is due to high rate of cardiovascular diseases, cancer, respiratory and metabolic disorders such as obesity, smoking, sedentary lifestyles, alcohol and substance abuse.  | Mental health is critical for overall wellbeing and general health<br>There is need to increase the visibility and accessibility of mental health in Kenya.  |
| <b>Olack et al., 2022</b>  | The effect of community-based lifestyle modification program on risk factors for hypertension among adults living in an urban informal settlement | STEPS survey found that about 25% of Kenyans in study areas had hypertension, and half of adults over 40 are hypertensive. Among hypertensive cases in the study, only 4% of hypertensive cases are controlled/managed.  | Reduced consumption of salt can significantly reduce cases of hypertension<br>Audience expressed need to ensure sustainability of interventions such as the lifestyle modification done by the study   |
| <b>Obonyo et al., 2022</b> | Food Environment Research in Kenya  | Food is a major public health concern due to its potential impact on health leading to diseases i.e NCDs and death<br><br>There is substantial advertisement of unhealthy foods around schools contributing to unhealthy food choices for children<br><br>BMI and obesity in adults was noted higher in households that purchased products from supermarkets | Need for research to determine physical food environment that consumers interface with to develop policy options for healthy living<br><br>There is a need to restrict advertisements around schools and/or foster policies/strategies for healthy foods advertisements within school environments<br><br>There is need for health education on food and food economics, diet, nutrition and physical activity |

## DISCUSSION

During the 12th KEMRI Annual Scientific Health Conference 2022, one of the major issues discussed was the high burden of mental health. It was noted that there is a high burden of mental health diseases and high prevalence of stigma and discrimination but the level of investment in this area is low. Mortality of people with mental health is due to high rate of cardiovascular diseases, respiratory and metabolic disorders such as obesity, smoking, sedentary lifestyles, alcohol and substance abuse. Depression is common among patients with diabetes, cardiovascular diseases and cancer. Notably, the burden of mental disorders is likely to be underestimated because of inadequate appreciation of the connectedness between mental illness and other health conditions <sup>6</sup>. The interactions between mental health and other illness are protean, and there can be no health without mental health. Mental disorders increase risk of communicable and non-communicable diseases, and contribute to unintentional and intentional injury <sup>6</sup>. Conversely, many health conditions increase the risk for mental disorder, and comorbidity complicates health-seeking, diagnosis, and treatment, and influences prognosis.

People with severe mental disorders in low-income and middle-income countries continue to experience neglect discrimination and human rights abuses <sup>7</sup>. More than 80% of people with even the most severe mental disorders have little or no access to effective treatment or care <sup>7</sup>.

Food environment research in Kenya, has shown that access to healthy food is a key determinant of dietary behaviour which has a major impact on nutritional status, disease burden and health outcomes. Kenya is undergoing a nutrition transition, characterized by a change from traditional staple foods to the adoption of western diets that have more saturated fat, less fibre, more sugar and salt. These dietary changes are part of the explanation for the increased burden of diet-related chronic diseases, such as obesity, cancers, hypertension and diabetes. Palpable socioeconomic disparity exists at the population-level on access (spatial and economic) to affordable, healthy and nutritious food. The study recommended a need for health education on food and food economics, diet, nutrition and physical activity (KASH 2022).

## CONCLUSION

Conversely, NCDs, like other stressors, may trigger depression, post-traumatic stress disorder, and other common mental disorders. In addition, mechanisms involved in the onset of cardiovascular diseases, diabetes, cancer, and respiratory disease may also contribute to mental disorders.

## RECOMMENDATION

There is need for health education on the importance of healthy food, nutrition and physical activity and awareness creation to the populations at-risk of NCDs to facilitate early treatment interventions.

Policy framework and guidelines for interventions on mental health are needed for overall wellbeing and general health.

## REFERENCES

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