

Thirty years of Rwanda's resilience and success: a sign of hope for mental health recovery after the 1994 genocide against the Tutsi

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INTRODUCTION

Thirty years have passed since the 1994 genocide against the Tutsi, which decimated the country. However, Rwanda's story is not solely one of the traumas. It also demonstrates the continuing human capacity for resilience. While the effects of the genocide are undeniable, Rwanda has made remarkable progress in addressing mental health issues and cultivating a healing culture [1,2]. Following the tragedy of 1994 genocide against the Tutsi in Rwanda, the world watched with horror as the country dealt with the massive trauma inflicted on its people.

The 1994 genocide against the Tutsi left an indelible mark on Rwandans' physical and mental health, claiming over a million lives and leaving countless men, women, and children scarred by the violence and brutality [3].

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IMPACT AND RWANDA'S RESILIENCE

The psychological impact of the 1994 genocide against the Tutsi was enormous. Survivors witnessed horrible atrocities, lost loved ones, and dealt with unimaginable emotional trauma. Research from Rwanda's northern area revealed the long-term effects of this trauma, with Mental Health and Psychosocial Support (MHPSS) users still struggling more than two decades after the 1994 genocide against the Tutsi [4]. More studies have shown that the burden of post-traumatic stress disorders (PTSD) and other mental health disorders among Rwandans is still huge [2]. Women had a higher prevalence of mental problems (23.2%) compared to men (16.6%) ($p < 0.05$), and the most common mental disorders were severe depressive episodes (12.0%), followed by panic disorder (8.1%), and PTSD (3.6%). Among genocide survivors, women had a higher frequency of mental disorders (53.3%) than men (48.8%),

mostly major depressive episodes (35.0%), PTSD (27.9%), and panic disorder (26.8%) [5]. Despite the severe scars left by the 1994 genocide against the Tutsi, Rwanda has made considerable progress in treating mental health concerns and promoting healing and reconciliation in its communities.

Intriguingly, studies done by researchers from the University of Rwanda's Center for Human Genetics and international collaborators have demonstrated scientific evidence of intergenerational transmission of PTSD and epigenetic defects among trauma survivors and their offspring [6–8]. These epigenome-wide association studies identified several differentially methylated regions (DMRs) as well as several potential biomarkers in genocide survivors with potential impact on brain function and likely to be transmitted over generations. These discoveries are relevant to drug targets and present hope for developing precision medicine for preventing trauma and PTSD effects.

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Beside the trauma consequences it is worth noting that Rwanda remains a testimony to its population's incredible resilience in the face of inconceivable hardship [3]. Rwanda has made considerable progress in treating mental health disorders through different programs, including a comprehensive campaign to support and care for survivors. One of the cornerstones of Rwanda's mental health response has been the integration of mental health services into primary care settings [9,10]. Rwanda has been able to serve a greater percentage of the population by decentralizing mental health care and educating community health workers to identify and help people in need, particularly in rural areas where access to specialized services is limited. This method has been praised by experts as an example for other countries facing similar issues [5]. Rwanda has been able to expand mental health services to the community by providing CHWs with mental health training, overcoming challenges such as stigma and a lack of understanding. This technique, which involves the use of electronic health technology for training, has been shown to be viable and effective in increasing mental health awareness and support on a large scale [5,10,11].

Traditional healing techniques have also played an important role. Gacaca courts, where community members took part in offering justice and the reconciliation process, provided a unique way to healing and social cohesion [12]. Gacaca courts, a traditional community-based justice system, greatly contributed to addressing crimes of genocide, trying millions of genocide perpetrators and giving justice to survivors but also enhanced speedy reconciliation among Rwandans. Furthermore, Rwanda has prioritized efforts to reduce the stigma associated with mental illness and foster open discourse about mental health issues. Rwanda has tried to dispel myths and cultural taboos around mental illness through public awareness campaigns and community-based efforts, encouraging people to seek assistance and support when they need it [13]. Moreover, a hybrid intervention, such as community-based sociotherapy, was adopted, integrating psychological trauma healing with rebuilding community trust and resilience [13]. This transformation in attitudes has helped to break down obstacles to care and create a more supportive atmosphere for people suffering from mental illnesses.

Rwanda's approach to mental health care and resilience-building following the 1994 genocide against the Tutsi has gained scholarly appreciation. Survivors who were traumatized during the 1994 genocide against the Tutsi improved significantly in their mental health outcomes after participating in community-based sociotherapy programs [14,15]. These programs, which include supportive-expressive group therapy and psychological support, were found to be beneficial in helping participants reduce their symptoms of depression, anxiety, and PTSD [16]. Furthermore, studies undertaken by the University of Rwanda's Center for Mental Health demonstrated the significance of community resilience in improving mental well-being in post-genocide Rwanda. Robust social support networks and a sense of belonging within communities were critical in mitigating the effects of trauma and developing resilience in survivors [4].

While Rwanda has made tremendous progress in treating mental health issues following the 1994 genocide against the Tutsi, challenges still exist. Access to mental health services is uneven, particularly in remote locations, and there is a need for ongoing investment in mental health infrastructure and worker training [17]. In addition, stigma around mental health disorders remains a barrier [18]. Persistent challenges underline the need for continued efforts to promote access to mental health care, reconciliation, and healing throughout Rwandan society to resolve the underlying trauma and establish a more resilient nation.

Despite these hurdles, Rwanda's growth is unquestionable. Rwanda has emerged as a beacon of hope by putting mental health first and cultivating a resilient culture. Rwanda's tale exemplifies how communities can heal, rebuild, and move forward in the face of terrible suffering.

CONCLUSION

Today, Rwanda commemorates the 30th anniversary of the 1994 genocide against the Tutsi, serving as an inspiration for the rest of the world. Rwanda's continuous commitment to mental health care and resilience-building interventions has proven the power of resilience in overcoming even the darkest chapters of history. As we reflect on Rwanda's path, let us take heart from the success stories and renew collective commitment to promoting the

mental health and support of all individuals and communities touched by trauma and suffering

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