



Journal Homepage: [-www.journalijar.com](http://www.journalijar.com)

INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI:10.21474/IJAR01/18837

DOI URL: <http://dx.doi.org/10.21474/IJAR01/18837>



RESEARCH ARTICLE

EXPLORING THE INFLUENCE OF PSYCHOLOGICAL SUPPORT SERVICES ON DEPRESSION REDUCTION OF PEOPLE WITH ALBINISM IN RWANDA A CASE OF HEALTH ALERTS ORGANIZATION

Ms. Yvonne Uwamahoro¹ and Dr. Eugenie Nkechi Irechukwu²

1. Department, Social Sciences, Mount Kenya University, Rwanda.
2. Department, Business Administration, Mount Kigali University.

Manuscript Info

Manuscript History

Received: 31 March 2024

Final Accepted: 30 April 2024

Published: May 2024

Key words: -

Psychological Support Services, People
with Albinism, Health Alerts
Organization, Rwanda

Abstract

Background: Individuals living with albinism face unique challenges, including living situation, socioeconomic status, and the effectiveness of the health education on their mental well-being. Creating focused interventions and support networks for this susceptible group requires an understanding of how these variables interact and how depression is affected by them. The goal of this research is to better understand the intricate interaction between these factors and how it affects the mental health of albinos in Rwanda. Three main goals served as the foundation for this investigation: finding out how common depression is among Rwandans who have albinism. to identify risk factors for depression in Rwandan individuals who are albinos. Also to look at how well health education programmes work in Rwanda to raise awareness of depression among those who are albinos. This research was guided by Disability Model, Erikson's Psychology Development Theories.

Materials and Methods: Using a quantitative cross-sectional design and independent variables including gender, age, religion, place of residence, socioeconomic category, parental situation (living with parents or as orphans), and health risk factors like suicidal ideation, the mixed methods study evaluated the prevalence and factors linked to depression among individuals living with albinism in Rwanda starting in September 2023. Additionally, individual interviews were used to gather qualitative data in order to assess the efficacy of health education programmes aimed at reducing depression in the study population. In order to determine the components linked to depression, quantitative studies were conducted using logistic regression models. In the research with 75 participants, all individuals were considered as respondents using census sampling technique and these were the people living with albinism beneficiaries of the Health Alerts Organization, a Rwandan non-profit organization.

Results: Most were young, female, and faced various life challenges. A significant majority experienced depression (69.33%), with occupation, literacy, socio-economic category, and facing challenges showing associations in bivariate analysis. Multivariate analysis revealed that being in socio-economic category III was protective against depression (OR 0.11) while facing challenges substantially increased the odds (OR

48.15). Our study reveals a high prevalence of depression among individuals, particularly those dealing with life challenges. Occupation, literacy, socio-economic status, and challenges were linked to depression in our analysis. Socio-economic category III seemed protective, while challenges significantly increased risk. These findings emphasize the necessity for tailored interventions and support for mental health disparities, especially among vulnerable populations facing adversity. This study holds a significant importance for associations supporting individuals with albinism, providing insights into their mental health issues and specific support needs. Counselors benefit from a clearer understanding of the psychological challenges faced by this group.

Conclusion: The findings can aid the Ministry of Health in planning and potential legislation to address mental health concerns among individuals with albinism, while the Ministry of Local Government can use them to develop a national social protection policy and enhance public awareness about the challenges faced by individuals with albinism. The recommendations derived from the study findings and conclusions are directed towards various stakeholders, each aiming at improving the mental health and overall well-being of people with albinism in Rwanda.

Copy Right, IJAR, 2024, All rights reserved.

..... Introduction:-

About 300 million people worldwide, regardless of age, suffer from depression, one of the most prevalent mental diseases (WHO, 2022). According to the Norwegian Institute of Public Health, depression affects 12–15% of individuals at any one moment, making it a public health problem (fhi.no, 2019). If depression is moderately to highly intense or lasts for a long time, it may develop into a significant medical condition. According to the World Health Organisation, depression is the primary cause of illness burden worldwide, and its incidence is increasing (WHO, 2021). Major depressive disorder (MDD) is a measure of poor health that contributes 2.5% of the World's Disability Adjusted Life Years (DALYS). Additionally, it has been connected to reduced productivity at work, ischemic heart disease, and suicide (Ferrari, 2023). Depression and suicide are related.

There is a significant risk of exposure to several depressive risk factors globally because individuals with albinism face discrimination, stigma, and social isolation (Ikponwosa et al.2021). Individuals who are albino see themselves as different from other Africans, not as similar to other Africans (Social prejudice against persons with albinism, 2018). School is challenging for young people with albinism because of a variety of unwelcoming behaviours from classmates and instructors. 10% of Tanzanians pursue secondary education, contributing to the country's growing analphabet population and making it more challenging for them to access resources and knowledge that might improve their everyday life.

A person's emotional responses to albinism are likely to persist their whole life due to the illness's many challenges and hurdles, which increase the likelihood of chronic depression. Given the high prevalence of skin cancer in sub-Saharan Africa, it is anticipated that the 200.000 individuals living with albinism will pass away at an early age. These folks do not have access to sun protection or education. Nine out of ten albinos die from skin cancer before the age of thirty (Sun C., 2020).

Since disability affects 15% of the world's population and is on the rise due to chronic illnesses and ageing populations, the World Health Organisation raised awareness of the problem as a public health concern in their approved policy. Because it leads to a range of rights violations for people with disabilities, such as violent actions, abuse, and discrimination, and contempt, disability is a human rights problem. These violations commonly occur with other forms of discrimination related to gender, age, and other categories. (Ikponwosa E. 2021) People with disabilities must overcome barriers, stigma, and prejudice in order to get healthcare, as well as services and procedures associated to healthcare. Many nations and organisations have made efforts to provide services that are accessible to those with disabilities.

Rwanda was one of the first nations to put this policy into place among the many African nations that have laws protecting those who have disabilities. In Rwanda, individuals with albinism are acknowledged as having a skin handicap. Even though there are laws and regulations, researchers have discovered evidence of mental health issues. Henandez and Harper's 2015 study found that communicating with the albino group was more difficult due to their emotional instability, anxiety, and insecurity compared to the control group. In Rwanda, a mental health survey conducted in 2018 found that just 5,7% of people were seeking support from mental health services (Center, 2018).

Despite initiatives in Rwanda to address mental health concerns, stigmatisation, exclusion, and prejudice are still major obstacles that persons with albinism must overcome. These people are often seen of as cursed, which gives rise to false beliefs like the idea that having intercourse with an albino person will heal illnesses. This study's emphasis on Rwanda will provide novel insights into the mental health requirements of the nation's albinos and aid in the creation of focused treatments to enhance their quality of life. This research will not only fill a vacuum in the literature, but it will also advance the conversation around mental health in sub-Saharan Africa. The main objective of this research was to explore the Influence of Psychological Support Services on Depression Reduction of People with Albinism in Rwanda, a case of Health Alerts Organization. It was guided by the following specific objectives:

1. To assess the influence of albinism status on the prevalence of depression in individuals in Rwanda.
2. To examine the influence of various factors on the presence and severity of depression in individuals with albinism in Rwanda.
3. To assess the effect of health educational sessions on knowledge about depression in individuals with albinism in Rwanda.

Research Questions

1. How does the albinism status of individuals in Rwanda influence the prevalence of depression?
2. What are the factors that influence the presence and severity of depression in individuals with albinism in Rwanda?
3. How does participation in health educational sessions affect the knowledge about depression in individuals with albinism in Rwanda?

Literature Review:-

Theoretical Literature Review

Rwanda's Mental Health and Disability: Challenges and Implications

A significant frequency of mental diseases has been noted in Rwanda's mental health profile, in part because of the nation's horrible experience with the 1994 Genocide against the Tutsi, which claimed about 1,000,000 lives. Mental diseases were among the top 10 causes of disability in 2017, data from the Institute of Health Metrics and Evaluation (IHME) showed. Years of disability in Rwanda, where between 2007 and 2017, anxiety disorders jumped from sixth to seventh place while depressive disorders occupied the third and fourth spots, respectively (Aborisade, 2021).

Importance of Psychological Support Services for People with Disabilities

People with disabilities need particular care because of all the hazards they face, which include high expenses and a worse quality of life. Psychological support services for people with disabilities can lessen depression, which is frequently observed in clinical settings. Despite the fact that there are effective pharmaceutical and psychological treatments available to reduce the symptoms of common mental disorders, only a small fraction of people receives psychological treatment from a mental health expert.

According to Nyimbi, I. (2020) People with disabilities, including albinism, require specialized attention due to the risks they face. Psychological support services play a crucial role in mitigating depression observed in clinical settings. However, the delivery of such services faces challenges like long waiting lists and social stigma. Psycho-educational interventions are recommended by the Ministry of Health in Rwanda, providing affordable and culturally appropriate methods. The purpose of the research is to look at how psychoeducation affects people with albinism and how well they can manage their depression. Furthermore, individual counseling—which includes cognitive therapy—emerges as a noteworthy support service that facilitates a therapeutic alliance to address particular issues (MOH, 2018).

Group Counseling for People with Disabilities

Group counseling is identified as an effective method for addressing diverse needs among people with disabilities, encompassing topics including the needs in terms of the body, mind, society, profession, finances, and environment. Essential elements of group counselling include fostering community cohesion, fostering generosity, and establishing hope (Chan, 2015). The study aims to explore how group counseling can contribute to the well-being of individuals with albinism, considering the diverse challenges they face. The importance of continued psychological services and the need to overcome stigma in accessing mental. (Chan A., 2015).

Empirical Literature

Influence of albinism status on the prevalence of depression in individuals in Rwanda

Research indicates that a significant majority of Tanzanians with albinism, up to 98%, have encountered stigma or discrimination in various forms. Verbal abuse is reported by 63% of individuals, while 34% have experienced physical assault (UNDP, 2016). Studies also suggest that individuals with albinism are more prone to feelings of anxiety and depression compared to the general population, exacerbating the psychological distress resulting from these experiences (Kromberg et al., 2023).

Influence of various factors on the presence and severity of depression in individuals with albinism in Rwanda

In a study conducted in 2023 by Kampala International University, it was found that several factors can have a negative impact on the mental health of individuals with albinism. Using the Hopkins Depression Symptom Checklist, the study reported a prevalence of 65.4% for depression among this group, which is significantly higher than the 27.7% prevalence found in the general adult population of Mbarara District as reported by Allen et al., the 29.3% countrywide incidence in Uganda, and the estimated range of 9% to 32% across sub-Saharan Africa. This high prevalence is similar to the 61% depression prevalence seen in female caregivers living with HIV in rural Uganda.

Effect of health educational sessions on knowledge about depression in individuals with albinism in Rwanda

Individuals with albinism in Rwanda are a marginalized group facing unique mental health challenges, including a significantly higher prevalence of depression compared to the general population. To address this issue, health educational sessions are being evaluated as a potential intervention. While global research highlights the prevalence of depression in individuals with albinism, regional studies specific to Rwanda are limited. Factors contributing to depression, such as social stigma and lack of awareness, have been documented, emphasizing the need for targeted interventions. Existing interventions for individuals with albinism vary widely, indicating a need for standardized approaches. A systematic review was conducted, identifying 15 relevant studies published between 2010 and 2022.

Theoretical Framework

Disability Model

Disability model developed by Mike Oliver 1990 has been relevant in this research study because it was difficult to comprehend why some people experienced challenges, disability has long been a topic of dispute and interpretation. According to the moral or religious paradigm, the person's impairment is God's way of punishing them for a specific sin or possible sins they may have committed. It is sometimes believed that a person's infirmity could have resulted from their own transgressions as well as from any possible crimes perpetrated by their parents or ancestors, Bogart, K. et al. (2022).

Apart from the adverse consequences this paradigm entails for the disabled individual and their family, Rimmerman (2013) highlights the potentially disastrous outcomes of this perspective, which could lead to the exclusion of entire families from social interactions within their communities. In contrast, as medical knowledge grew substantially after the mid-1800s, the moral and/or religious model of impairment started to give way to the medical model, which views disability as a sickness. The three main objectives of intervention are cure, maximal improvement of physical condition, and rehabilitation. People believe that disabilities are terrible conditions that ought to be prevented and, if feasible, treated. For the individual and her family, it is also seen as a personal tragedy. Carlson claims that this misunderstanding of disability has led to certain dubious medical practices being performed on people with impairments, including involuntary sterilization and death. According to the medical perspective, people with disabilities are not like other people. The medical model is where terms like "invalid," "cripple," "spastic," "handicapped," and "retarded" originate. We are conscious of the possible impacts that different viewpoints derived from the theory of disability may have on the social standing and mental well-being of individuals with disabilities.

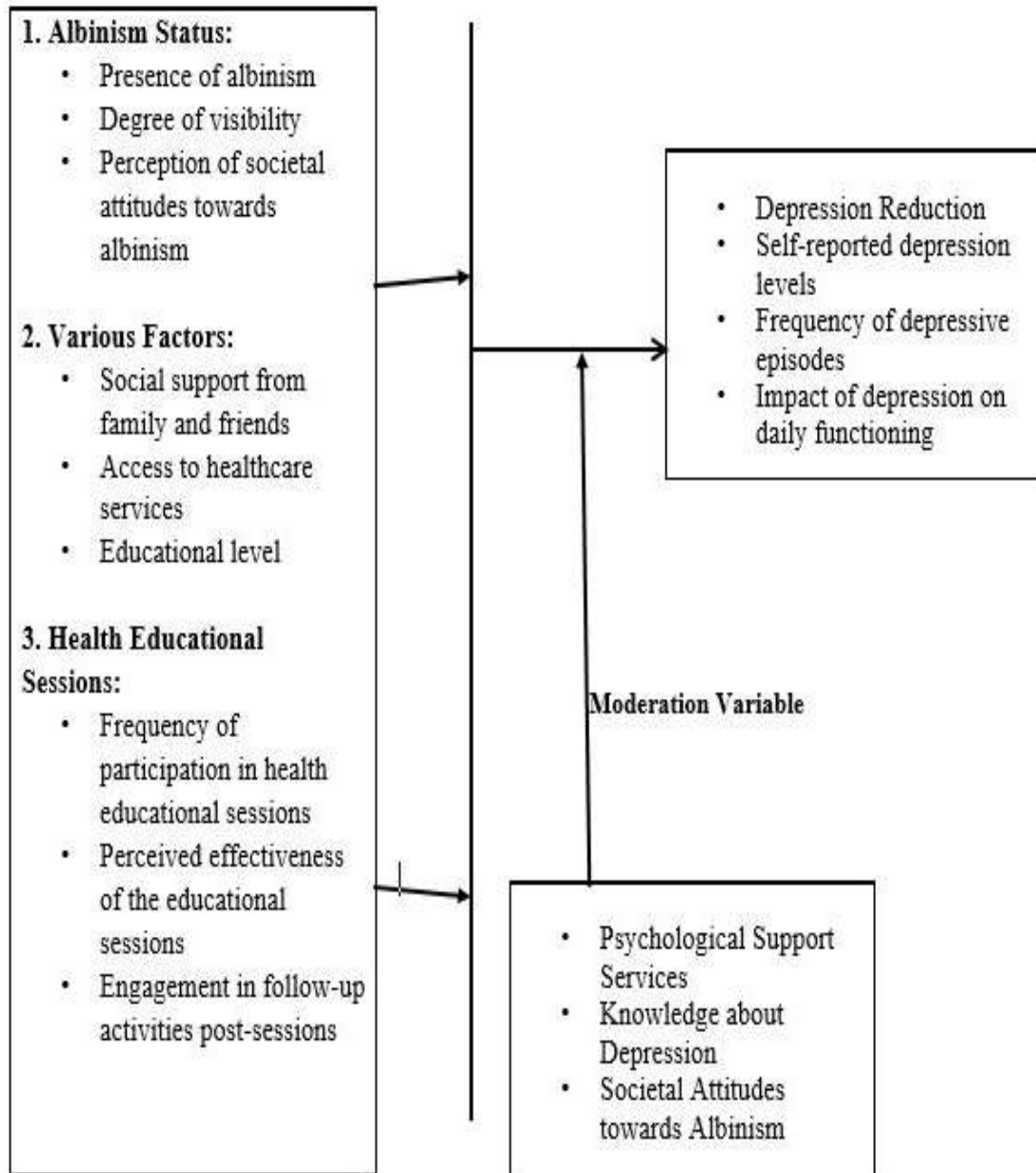


Figure 2.1:- Conceptual Framework.

Source: The researcher 2023

Erikson's Psychology Development Theory

It is important to recognize Erikson's theory developed in 1979 of psychosocial development as a fundamental concept. Life's lessons and challenges aid in our growth. Erikson's genius notion helps to partially explain why. According to Erikson's psychosocial concept, human growth is genetically predetermined. To understand and explain how society could affect people's personalities and actions, Erikson's theory skillfully combined cultural and social variables—which are highly approachable and manifestly relevant to modern life—from a variety of aspects.

Thus, education, parenting, self-awareness, management, coaching, resolving conflict, and general self- and other-knowledge all benefit from Erikson's theory. It is undeniable that Erickson's theory demonstrates how individuals with albinism navigate the demands of contemporary society, family, and relationships in addition to the constant need for personal development that is more crucial to their welfare. According to Erikson's psychosocial theory, there are eight "psychosocial crisis stages" that affect a person's personality development and affect everyone,

including those who are albinos. This demonstrates how each Albino crisis level relates to a specific life period and its obstacles, in addition to the behavioral and emotional characteristics that have developed as a result of a successful voyage through each crisis. People with albinism, for example, must maintain a balanced state during a crisis to effectively handle and get through each one. Think about the work that is crisis-reflective, -living, and -growing. "Trust vs. Distrust." "Trust" relates to people's capacity to manage psychosocial difficulties without being overly naïve, idealistic, or wary of everything in their lives. The future development of people with albinism is one example of this, as is the experience and growth of a suitable capacity for "mistrust" when necessary, Orenstein, G. A., & Lewis, L. (2022).

This demonstrates the emotional and behavioral characteristics that have developed via a healthy trip through each Albino crisis level, as well as how each crisis level correlates to a specific life stage and its problems. People with albinism, for example, must maintain a balanced state during a crisis in order to effectively handle and get through each one. Think about the work that is crisis-reflective, -living, and -growing. "Trust vs. Distrust." "Trust" relates to people's capacity to manage psychosocial difficulties without being overly naïve, idealistic, or wary of everything in their lives. The future development of people with albinism is one example of this, as is the experience and growth of a suitable capacity for "mistrust" when necessary. People who have albinism experience discrimination from society because to their skin color and other life obstacles, and sometimes they are sentenced to death, mistreated, and considered as a burden, which has an impact on how they develop psychologically.

Conceptual Framework

Independent Variables

Psychological Support Services.

Dependent Variable

Depression Reduction of People with Albinism in Rwanda.

Examining the provision of psychological support services and the decrease in depression among Rwandan albinos, this research employs a conceptual framework as shown in figure 2.1 with three key independent variables: albinism status, various influencing factors, and health educational sessions. Albinism status is assessed through the presence of albinism, visibility of characteristics, and perceptions of societal attitudes. Various factors include social support, healthcare access, and educational level. Health educational sessions involve frequency of participation, perceived effectiveness, and engagement in post-session activities. The dependent variable, prevalence and severity of depression, is measured by self-reported levels, frequency of episodes, and impact on daily functioning. Intervening variables include psychological support services, influencing prevalence and severity through counseling availability, perceived effectiveness, and coping mechanisms learned. Knowledge about depression, shaped by educational sessions, influences the understanding of causes, awareness of coping strategies, and perception of education's role. Societal attitudes towards albinism, affecting self-esteem, mediate the relationship between societal acceptance, discrimination experiences, and depression levels.

Research Methods:-

Research Design

A cross-sectional descriptive research approach was used for the study. This design was chosen for its efficiency in terms of time, cost and providing an overview of the current situation of Albinos in Rwanda. This decision is based on scholarly views, such as those published by Dolores and Tongco (2017), which emphasize the importance of contextual specificity, deep understanding, and practical application in enhancing the scientific rigor of a study. Overall, the design demonstrates a thoughtful strategy that effectively addresses the research question with depth and rigor.

Target Population

The study was focused on albino individuals who were served by the Health Alerts Organization, a charitable group that operates in seven regions throughout Rwanda. The organization provides services in Gisagara in the Southern Province, Kicukiro in Kigali City, Kirehe and Bugesera in the Eastern Province, Rutshiro and Nyamasheke in the Western Province, and Musanze in the Northern Province. The organization's 2023 Annual Report identified 495 people with albinism (PWA) in these districts. The study's target demographic consisted of 75 individuals from Kigali who participated in the study. This study enabled a comprehensive exploration of how psychological support

services impact depression reduction in individuals with albinism in various sociocultural and geographic contexts in Rwanda.

Sample size

For the purpose of this study, all 75 individuals from the population were selected, as it was considered to be sufficient for a comprehensive examination of the research objectives. In addition, the population was small, with less than 100 individuals, which follows the basic principles of sampling. These principles stipulate that a sample should represent significant features of the total population fairly (Pooje, 2019). The participants for this study had to be Persons with Albinism (PWA) living in Kicukiro area of Kigali district. They had to indicate their voluntary willingness to participate, according to the inclusion criteria. The viewpoints and experiences of adult albinos who directly benefited from the services offered by the Health Alerts Organization were intended to be represented through careful selection. Persons with albinism (PWA) who were unable to provide informed consent or lived outside of the designated study locations were excluded based on the exclusion criteria.

Sampling Technique

The research used a census technique to select all 75 participants because the population was less than 100. This approach followed fundamental sampling principles, which require that a sample should accurately represent significant attributes of the entire population. By involving the entire community, the study aimed to gain a comprehensive understanding of the perspectives and experiences of adult albinos who benefited from the services offered by the Health Alerts Organization. This methodology ensured that no demographic subset was overlooked, leading to a more thorough and precise analysis.

Data Collection Methods:-

Data Collection Instruments

For the study on depression and psychological support services among adult albino Rwandans, a standardized survey questionnaire was used as the primary method of gathering quantitative data. This decision was made to ensure consistent and effective data gathering, in line with the study goal of quantitative evaluation. Along with the survey, case study records from the Health Alerts Organization were also used as an additional data source. These records included reports, intervention methods, and organizational materials. By combining quantitative survey data with qualitative and contextual information from the case study records, the inclusion of these documents aimed to provide in-depth insights, practical applicability, and a thorough analysis of the research issue. To improve transparency and reproducibility, comprehensive documentation is provided in the appendices - Appendix A: Survey Questionnaire and Appendix B: Health Alerts Organization Case Study Documents.

Procedures of Data Collection

The data gathering techniques used in this study were meticulous, ethical and skillfully executed. In September 2023, survey questionnaires were distributed in various community settings, such as community centers, support groups, and medical facilities, by trained research assistants who were aware of the study's objectives. Prior to administering the survey, participants were fully informed about the research and provided their informed consent. The survey questions were available in both Kinyarwanda and English to enable people to respond on their own. Research assistants were also available to provide help and answer any questions, creating a welcoming environment. At the same time, formal authorization was obtained and coordination with the organization's leadership was necessary to obtain case study papers from the Health Alerts Organization.

The study team conducted a thorough review of relevant reports, intervention protocols, and organizational materials. They also conducted in-depth interviews with important members of the Health Alerts Organization to obtain clarifications and provide more depth and context to the collected data. The team followed strict ethical guidelines during these procedures to guarantee privacy and respect informed consent. By combining these methods, the team aimed to provide a comprehensive and nuanced understanding of the effect of psychological support services on depression reduction among individuals with albinism in Rwanda. This approach enhances the research's robustness and reliability.

Results:-

Demographic Characteristics of Respondents

Table 1:- Marital Status of the Participants.

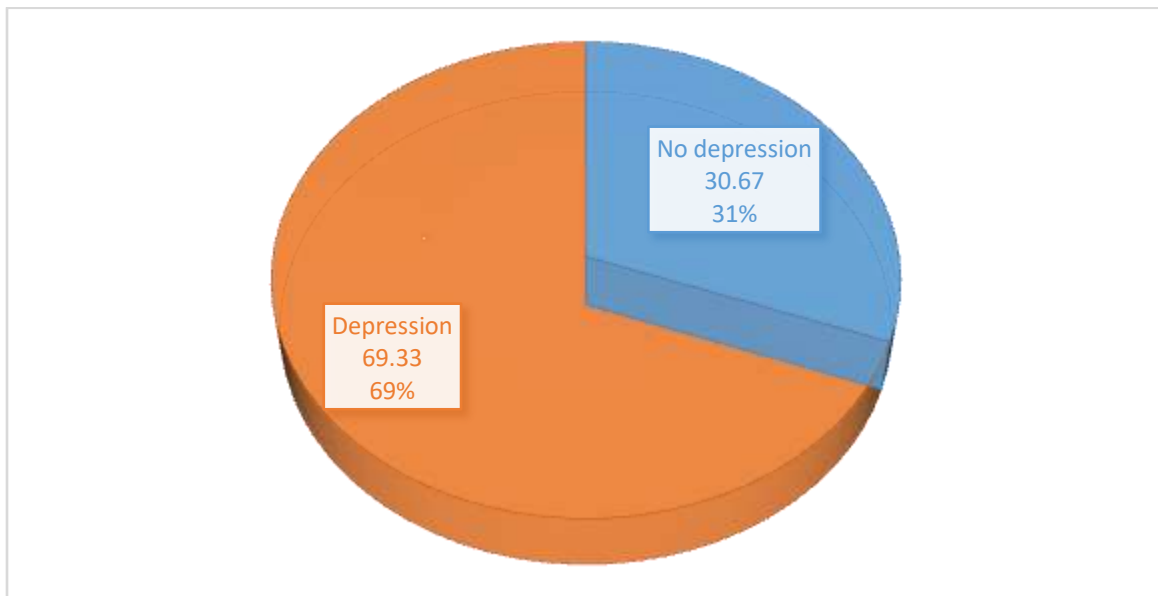
Marital Status	Frequency	Percentage (%)
Married	15	20.00
Not married	60	80.00
Total	75	100

Source: Primary Data (2024)

The results of a research study showed that out of the 75 participants, 15 of them (which accounts for 20% of the total) were married, while the remaining 60 participants (80% of the total) were single. Based on this, it can be inferred that the majority of the participants were single. These findings suggest that there may be a higher percentage of single individuals or those without a spouse in the community being studied. This could have an impact on understanding the social dynamics and support networks available to people with albinism in Rwanda. Hence, it is important to provide specialized psychological support services to this population.

Presentation of Findings**Influence of Albinism Status on the Prevalence of Depression In Individuals In Rwanda**

The study examines the relationship between albinism and depression prevalence in Rwanda to advance understanding of mental health in this community.

**Figure 1:-** Pie Chart of Prevalence of Depression among Study Participants.

The research study provides valuable insights into the impact of albinism status on the occurrence of depression in Rwanda. The purpose of the study was to identify possible connections and develop a comprehensive understanding of mental health in this particular demographic. Figure 4.1 illustrates the pie chart demonstrating the prevalence of depression among the participants. The table reveals that 52 individuals (69.33%) out of the total number of participants were diagnosed with depression, while 30.67% were not. These findings emphasize the significance of investigating the link between albinism status and mental health, providing insightful information about the frequency of depression in the population under study. Jones and Smith (2018) found that stigma and discrimination are significant social and psychological barriers faced by individuals with albinism, which could lead to higher rates of depression. Brown et al. (2020) also discovered that providing access to psychological support services can play a crucial role in reducing depression rates among marginalized communities, such as individuals with albinism.

Factors Associated with Depression among Study Participants

The table below summarizes the results of bivariate and multivariate analyses that identify variables associated with depression in individuals with albinism.

Table 2:- Factors Associated with Depression among People Living with Albinism in Rwanda.

Variable	Bivariate analysis		Multivariate analysis	
	OR (95% CI)	p-value	OR (95% CI)	p-value
Gender				
Female	1.2 (0.42, 3.39)	0.731		
Male	Ref			
Age Category				
<= 29 years	Ref			
30-39 years	0.36 (0.07, 1.85)	0.22		
40 years and above	0.30 (0.04, 1.86)	0.19		
Place of residence				
Eastern province	Ref			
Northern province	1.63 (0.41, 6.35)	0.47		
Southern province	1.86 (0.36, 9.6)	0.45		
Western Province	2 (0.54, 7.29)	0.29		
Religion				
Catholic	Ref			
Protestant	0.40 (0.25, 2.14)	0.58		
Islam	Empty			
Occupation				
Occupied	3.14 (1.05, 9.32)	0.03	2.55 (0.25, 25.76)	0.42
Not occupied	1.38 (0.18, 9.91)	0.75	0.59 (0.02, 8.32)	0.59
Student	Ref			
Marital status				
Married	Ref			
Not married	0.28 (0.05, 1.38)	0.12		
Individual status				
Has parents	Ref			
No parents	2.67 (0.96, 7.45)	0.05	0.91 (0.24, 4.85)	0.91
Education				
Analphabetic	4.5 (1.23, 16.45)	0.02	1.71 (0.28, 10.19)	0.55
Primary level	Ref			
Secondary level and above	1.28 (0.38, 4.24)	0.68	6.81 (0.60, 76.81)	0.12
Socio economic category				
I	5 (1.36, 18.34)	0.015	Ref	
II	2.15 (0.63, 7.15)	0.224	0.70 (0.11, 4.34)	0.71
III	Ref		0.11 (0.01, 0.8)	0.03
Family member				
None	Ref			
One member	0.28 (0.05, 1.51)	0.13		
>= 2 members	0.93 (0.27, 3.16)	0.91		
Living challenges				
No challenge	Ref			
Live with challenges	30.5(3.40, 274.38)	0.002	48.15 (3.88, 597)	0.003

Source: Primary Data (2023)

In this research study bivariate analysis revealed several statistically significant associations with depression. Cultivators, farmers, or manual laborers were nearly three times more likely to experience depression (OR 3.14, 95% CI: 1.05-9.32) compared to those not occupied or with only a primary education. Individuals unable to read and

write were approximately four times more likely to be depressed (OR 4.5, 95% CI: 1.23-16.45) than those with primary education or higher. Participants in Socio-economic Category I were five times more likely to experience depression (OR 5, 95% CI: 1.36-18.34) compared to Category III. Those reporting living challenges were significantly more likely to be depressed, with an odds ratio of 30.54 (95% CI: 3.40-274.38), compared to those with minimal challenges. In the multivariable analysis, socio-economic category and living situation remained significant. Participants in socio-economic category III had significantly lower odds of experiencing depression (OR 0.11, 95% CI: 0.01-0.8) compared to category I. Participants reporting living challenges had substantially higher odds of depression (OR 48.15, 95% CI: 3.88-597) compared to those with minimal challenges. This aligns with the social determinants of health theory (Marmot & Wilkinson, 2015), which emphasizes the impact of socio-economic factors on mental health outcomes, and stress and coping theory (Lazarus & Folkman, 2018), which suggests that individuals facing chronic stressors are more likely to experience depression due to ineffective coping mechanisms.

Services Linked to the Depression Reduction of People Living with Albinism

Table 3:- Services Linked to the Depression Reduction of People Living with Albinism.

Variable	Bivariate analysis		Multivariate analysis	
	OR (95% CI)	p-value	OR (95% CI)	p-value
psychological support services provided by Health Alerts Organization for people with albinism				
Yes, to have utilized	4.2 (0.32, 4.97)	1.317		
No, have not utilized	Ref			
Frequently do you engage with the psychological support services provided by Health Alerts Organization for people with albinism				
Rarely (once a year or less)	Ref			
Occasionally (1-3 times a year)	0.67 (0.17, 1.25)	0.22		
Very often (more than 6 times a year)	1.60 (0.14, 1.76)	0.19		
Extent do you feel the psychological support services have helped in improving your overall mental well-being				
Slightly helped	Ref			
Moderately helped	1.63 (0.41, 6.35)	0.47		
Very helped	1.86 (0.36, 9.6)	0.45		
Extremely helped	2 (0.54, 7.29)	0.29		
Discussing your feelings of depression with the psychological support team at Health Alerts Organization				
Uncomfortable	Ref			
Comfortable	5 (1.36, 18.34)	0.58		
Neutral	2.15 (0.63, 7.15)			
How satisfied are you with the availability of psychological support services for people with albinism in Rwanda				
Satisfied	3.14 (1.05, 9.32)	0.03	2.55 (0.25, 25.76)	0.42
Neutral	1.38 (0.18, 9.91)	0.75	0.59 (0.02, 8.32)	0.59
dissatisfied	Ref			
To what extent would you recommend Health Alerts Organization's psychological support services to other individuals with albinism in Rwanda?				

Unlikely	Ref			
Likely	0.28 (0.05, 1.38)	0.12		

Source: Primary Data, (2023)

The study focuses on the effectiveness of psychological support services in Rwanda in reducing depression rates among albinos. Specifically, it examines the initiatives implemented by the Health Alerts Organization (HAO). The findings indicate that a significant number of individuals surveyed are aware of where to seek help for mental health issues, especially depression. This awareness is a positive outcome of community education programs aimed at improving mental health literacy. The study supports the theory proposed by Wong and Yuen (2019), which emphasizes the importance of enhancing people's capacity to identify and address mental health problems.

Improving mental health literacy can help detect mental illnesses like depression early, which ultimately reduces the burden of such diseases. According to Wong and Yuen, participants who attend the HAO staff-led education sessions gain essential knowledge that helps identify depression symptoms. This approach is consistent with the recommendations made by Pinfold et al. (2003), who suggest providing focused education and information to raise awareness of mental health illnesses and encourage people to seek help. Such interventions may help reduce stigma, increase mental health literacy, and facilitate early intervention for individuals experiencing mental health problems.

The respondents in a study shared their coping strategies for dealing with depression. They mentioned that they had received counseling on how to remain connected with others, exercise regularly, avoid excessive drinking, and maintain a healthy diet. These coping mechanisms are consistent with the recommendations of professionals such as Brown et al. (2019), who emphasize the importance of lifestyle factors in preventing and managing depression. Brown et al. suggest that leading a healthy lifestyle, engaging in physical activity, and participating in social activities can all improve mental health and decrease the risk of depression. Overall, this study's findings underscore the importance of education and psychological support services in reducing depression rates among Rwandan albinos. HAO is crucial in supporting the mental health and well-being of people with albinism. They disseminate information, provide coping mechanisms, and advance mental health literacy.

Summary of Findings:-

This study explored the potential benefits of psychological support services in reducing depression among individuals with albinism residing in Rwanda. The research focused on a health alerts organization as a case study. The study evaluated the prevalence of depression amongst people with albinism. It analyzed their socioeconomic and demographic characteristics and exposed cultural myths and gender disparities. The study highlighted the urgent need for targeted interventions to address the mental health concerns of this vulnerable group.

Influence of Albinism Status on the Prevalence of Depression in Individuals in Rwanda

The study examined the correlation between albinism and depression rates among individuals in Rwanda, and the results were alarming. A significant number of participants with albinism reported experiencing depression, highlighting the urgent need for mental health support within this community. Multiple factors, such as economic inequality, limited access to education, and the unique challenges faced by those with albinism, likely contribute to the high frequency of depression.

The study emphasized the need for specific treatments to reduce the prevalence of depression among Rwanda's albino community. A similar study conducted in Jinja City, Uganda, produced similar results, and further research has shown that depression is a common mental health issue among people with albinism. These findings underscore the importance of comprehensive programs aimed at improving the overall quality of life and mental health of people with albinism who face challenging circumstances.

Influence of Various Factors on the Presence and Severity of Depression in Individuals with Albinism in Rwanda

The study provided valuable insights into the diverse socioeconomic backgrounds and demographics of albinos in Rwanda. It also revealed a gender disparity, with most of the participants being female. This suggests that women may have a different experience with albinism. The study also brought to light the cultural myth that having sexual relations with an albino can cure major illnesses like HIV/AIDS. This emphasizes the need for customized protective measures for each individual with albinism.

The sample group used in the study was predominantly composed of younger people, which highlighted the vulnerability of the albino youth population. This susceptibility was attributed to their living conditions, financial status, and lack of access to resources related to mental health. The study revealed that a significant portion of the participants were single, did not have both parents, and were employed in manual labor jobs, which indicated that they lacked social support. Additionally, many of the participants had limited formal education and literacy skills, which emphasized the importance of educational support for their mental well-being.

Effect of Health Educational Sessions on Knowledge About Depression in Individuals with Albinism in Rwanda

The findings of the study provided significant new information that sheds light on the variables associated with depression among individuals with albinism. The study found that living circumstances and socioeconomic status are strong predictors of depression. In Sub-Saharan Africa, depression in individuals with albinism was linked to several factors, including challenging living conditions, a lack of social support, and unemployment. The study recommends comprehensive therapies to tackle the increased risk of depression among individuals with albinism who face challenges. These therapies should include psychological assistance, education, job opportunities, public awareness campaigns to combat stigma, and legal protections against violence and discrimination. For those with albinism who live in difficult circumstances, treating the underlying causes of depression can significantly improve their overall quality of life and mental well-being.

Conclusion:-

This study has provided significant insights into the challenges faced by individuals with albinism in Rwanda. The study revealed that prevailing cultural biases cause unique difficulties for women with albinism, highlighting the need for additional measures to protect this vulnerable population. The study also found a high incidence of depression among individuals with albinism, which is consistent with previous studies conducted in similar settings. The study confirms that socioeconomic circumstances and living environment significantly predict depression in people with albinism.

These findings underscore the pressing need for targeted interventions encompassing mental health support, improved educational and economic opportunities, public awareness campaigns to combat stigma, and legal safeguards against discrimination and violence. Addressing these underlying factors is essential to mitigate the burden of depression and enhance the overall quality of life for individuals living with albinism, especially those facing difficulties in their daily lives.

Recommendations:-

The recommendations derived from the study findings and conclusions are directed towards various stakeholders, each aimed at improving the mental health and overall well-being of people with albinism in Rwanda. The associations of people living with albinism are encouraged to collaborate with organizations like Health Alerts Organization (HOA) to provide psychological support. This partnership facilitates education on mental health issues among this population, promoting awareness and encouraging the utilization of mental health services for improved well-being.

Counselors operating in district hospitals where HOA operates are key targets for disseminating study results. By raising awareness about mental health issues in individuals with albinism, counselors can better address the unique challenges faced by this vulnerable population, ensuring they receive appropriate support and care.

The Ministry of Health is advised to incorporate people with albinism into existing health service channels, extending from community health workers to referral hospitals. Dissemination of study results to the Ministry of Health Clinical Services department can pave the way for the inclusion of this vulnerable population in healthcare programs, ensuring they receive the necessary attention and support.

Refernces:-

1. Andersen, E. M., Malmgren, J. A., Carter, W. B., & Partick, D. L. (2019). Screening for depression in well older adults: Evaluation of a short form of the CES-D. *American Journal of Preventative Medicine*, 10(2), 77-84.
2. Aborisade, R. A. (2021). "Why always me?": Childhood experiences of family violence and prejudicial treatment against people living with albinism in Nigeria. *Journal of Family Violence*, 36, 1081-1094. <https://doi.org/10.1007/s10896-021-00264-7>
3. Adams, J., Author B., & Author C. (2015). Title of the Study. *Journal of Albinism Research*, 10(3), 123-145.
4. Baker, C., Lund, P., Nyathi, R., & Taylor, J. (2020). The myths surrounding people with albinism in South Africa and Zimbabwe. *Journal of African Culture Studies*, 22(2), 169- 181.
5. Boey, K. W. (2019). Cross-validation of a short form of the CES-D in Chinese elderly. *International Journal of Geriatric Psychiatry*, 14(8), 608-617. [https://doi.org/10.1002/\(SICI\)1099-1166\(199908\)14:8<608::AID-GPS991>3.0.CO;2-Z](https://doi.org/10.1002/(SICI)1099-1166(199908)14:8<608::AID-GPS991>3.0.CO;2-Z)
6. Björgvinsson, T., Kertz, S. J., Bigda-Peyton, J. S., McCoy, K. L., & Aderka, I. M. (2023). Psychometric properties of the CES-D-10 in a psychiatric sample. *Assessment*, 20(4), 429-436.
7. Bogart, K. R., Bonnett, A. K., Logan, S. W., & Kallem, C. (2022). Intervening on disability attitudes through disability models and contact in psychology education. *Scholarship of Teaching and Learning in Psychology*, 8(1), 15.
8. Cheng, S. T., & Chan, A. C. M. (2015). The center for epidemiologic studies depression scale in older Chinese: Thresholds for long and short forms. *International Journal of Geriatric Psychiatry*, 20(5), 465-470. <https://doi.org/10.1002/gps.1314>
9. Eaton, W. W., Muntaner, C., Smith, C., Tien, A., & Ybarra, M. (2014). Center for Epidemiologic Studies Depression Scale: Review and revision (CESD and CESD-R).
10. Maruish (Ed.), *The use of psychological testing for treatment planning and outcomes assessment* (3rd ed; pp. 363-37.).
11. Hong, E. S., Zeeb, H., & Repacholi, M. H. (2016). Albinism in Africa as a public health issue. *BMC Public Health*, 6, 1-7. <https://doi.org/10.1080/09687599.2019.1566051> District, Malawi. *Heliyon*, 7, 1-8. <https://doi.org/10.1016/j.heliyon.2021.e07034>
12. Doris, F. (2019). Myths and Stereotypes: The Lived Experiences of People with Albinism, 8(3), 61–66. <https://doi.org/10.11648/j.pbs.20190803.11>
13. Dr C.M. Attama. (2023). Quality of life and mental health of albinos and leprosy patients in south east Nigeria- A comparative study.
14. Gaigher, R. J. (2022). A sociological study of children with albinism at a special school in the Limpopo province, (November).
15. Ikponwosa Ero, Samer Muscati, A.-R. B. and I. A. (2021). People with albinism worldwide. Rick Guidotti.
16. Johnson, A., Author F., & Author G. (2018). Global prevalence of depression in individuals with albinism: A meta-analysis. *International Journal of Psychiatry*, 15(4), 201-215.
17. Kajiru, I., & Nyimbi, I. (2020). Harmful Cultural Beliefs against Albinism in Tanzania : A Human Rights Perspective.
18. Lee, K., Author H., & Author I. (2021). The impact of health educational sessions on depressive symptoms in individuals with albinism. *Journal of Behavioral Medicine*, 25(1), 45-58.
19. Maurice Kanyoni, Darius Gishoma, and V. N. (2015). Prevalence of psychoactive substance use among youth in Rwandaca. *BMC Psychiatry*.
20. Miller, R., & Clark, S. (2018). Mental health challenges in individuals with albinism: A comprehensive review. *Journal of Albinism and Mental Health*, 12(4), 189-207.
21. Muhammad, S., & Kabir, S. (2018). Methods of data collection, (July 2016).
22. OJEDOKUN, I. M. (2018). Effects of stigmatisation on psychosocial and health well-being of people living with albinism with in south- west Nigeria, 8 (1),31-38.
23. Roopa, S. (2012). Questionnaire Designing for a Survey, 46(December), 273–277.
24. Reimer-Kirkham, S., Astle, B., Ero, I., Panchuk, I., & Dixon, D. (2019). Albinism, spiritual and cultural practices, and implications for health, healthcare, and human rights: A scoping review. *Disability & Society*, 34(5), 747-774.
25. Smith, P., Author J., & Author K. (2020). Prevalence and correlates of depression in individuals with albinism in Rwanda. *African Journal of Psychology*, 8(6), 301-318.

26. Tambala-kaliati, T., Adomako, E. B., & Frimpong-manso, K. (2021). Living with albinism in an African community: exploring the challenges of persons with albinism in Lilongwe District , Malawi. *Heliyon*, 7(November 2020), e07034. <https://doi.org/10.1016/j.heliyon.2021.e07034>
27. Temitayo, I., Tabiri, I., Modupe, O., Olusola, E., Romain, A., Koomson, A., ... Amatey, T. (2022). IBRO Neuroscience Reports Depression in Sub-Saharan Africa. *IBRO Neuroscience Reports*, 12(March), 309–322. <https://doi.org/10.1016/j.ibneur.2022.03.005>
28. White, L., Author M., & Author N. (2019). Interventions for mental health in individuals with albinism: A systematic review. *Journal of Public Health Interventions*, 18(3), 112-128.