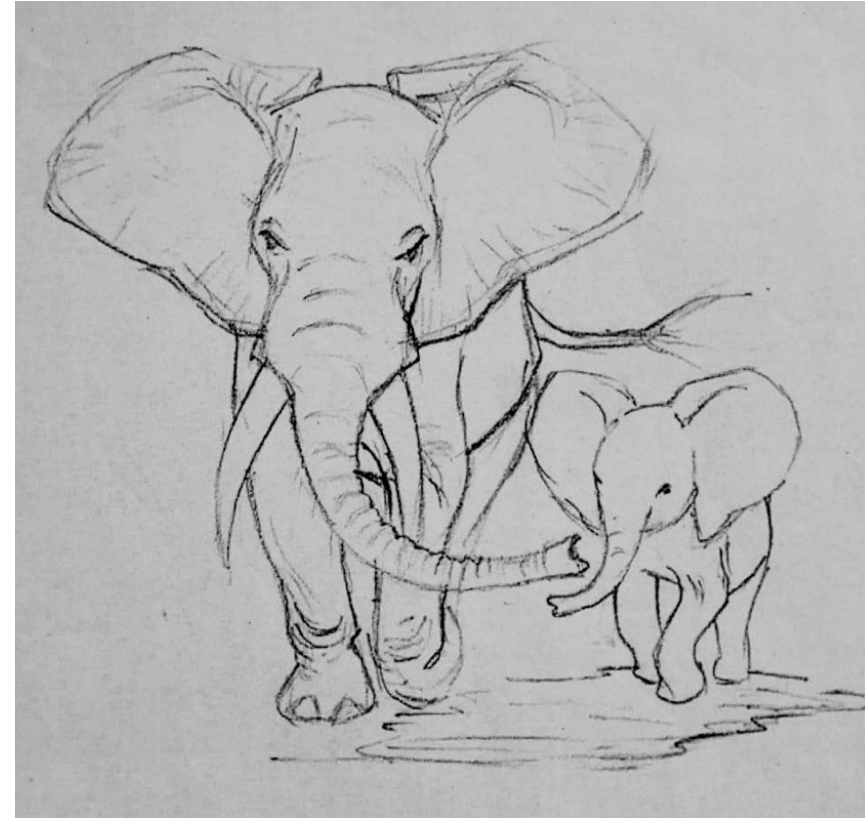


Cango Lyec (Healing the Elephant): Incidence of Depression and Post-Traumatic Stress in Northern Uganda in the Decade After Civil War

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Overview of Cango Lyec Cohort

- 2000+ Acholi people in Northern Uganda at risk of HIV in the aftermath of civil war
- 5-year prospective cohort
- Nwoya, Amuru, and Gulu districts, Northern Uganda
- Collaboration between Canadian & Ugandan investigators:

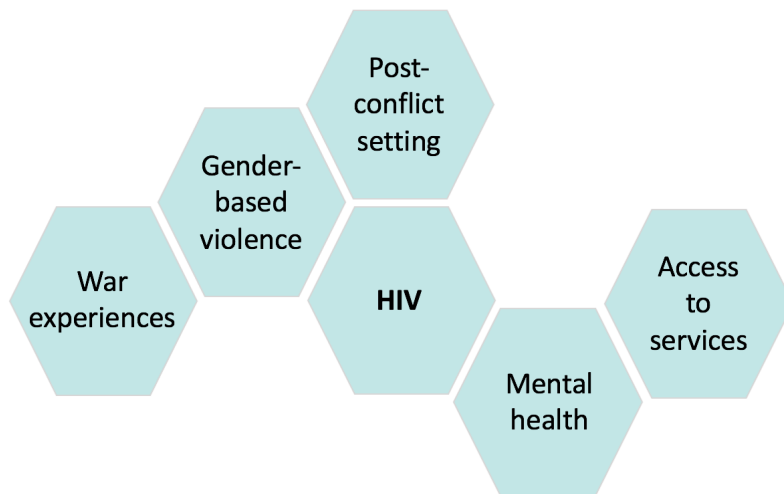


a place of mind
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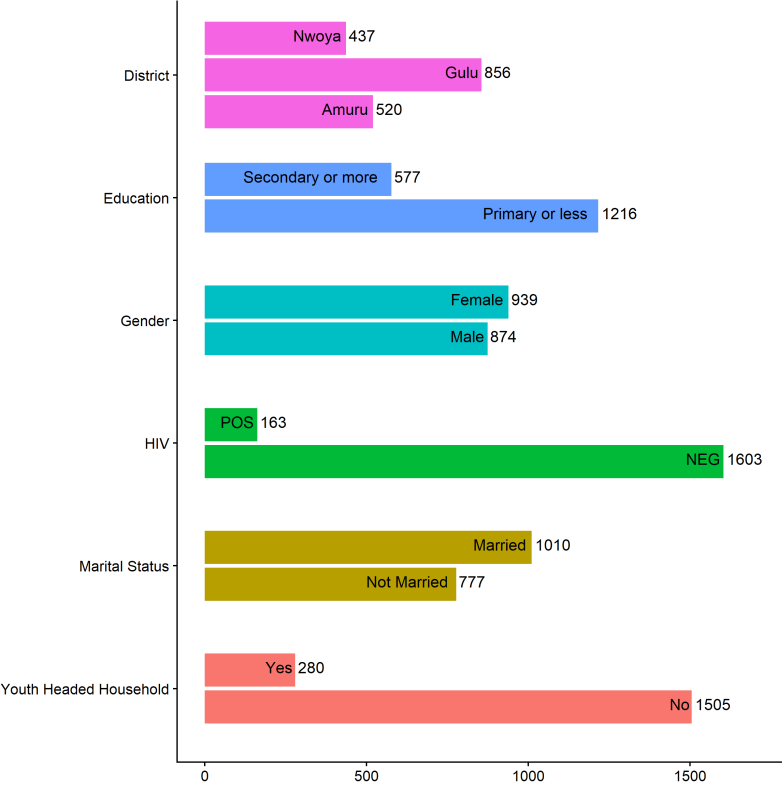
Northern Uganda Context

- 1986-2006: Protracted war between Lord's Resistance Army and Government of Uganda
- Widespread atrocities, human rights violations, and death
- 1.8 million internally displaced people (IDP) – 90% of population
- 2008 IDPs begin return to ancestral homes

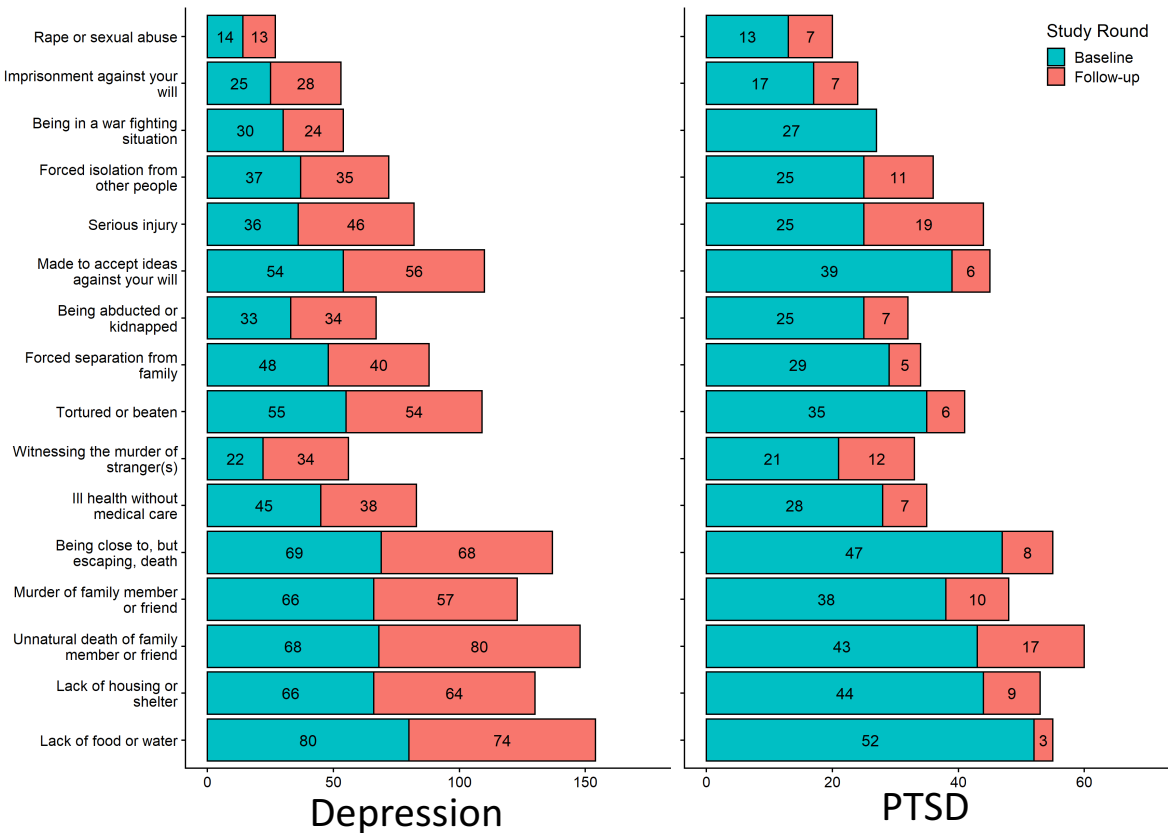


Participant Characteristics & War-Related Traumas

Baseline Cohort Characteristics



Traumatic experiences at baseline and follow-up among participants with incident probable depression (left) and PTSD (right)



Incidence of probable Depression & PTSD

Depression Sample

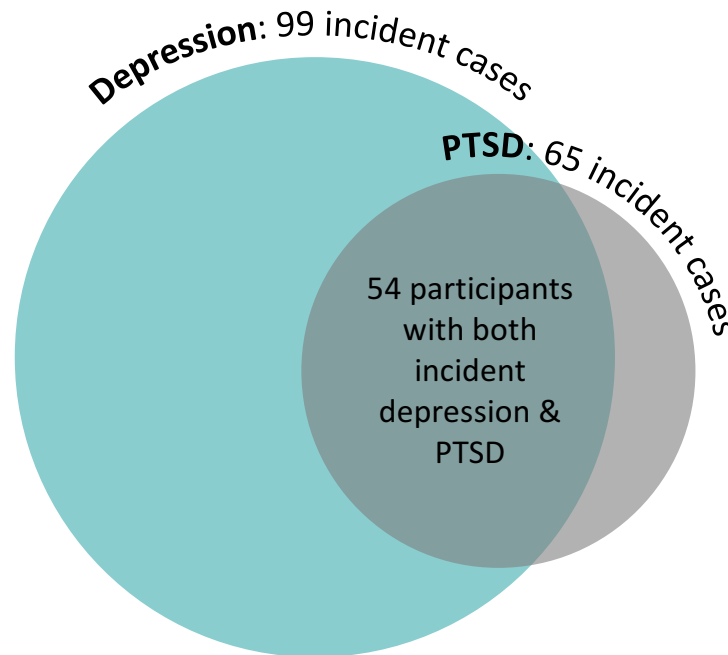
n=1877 participants without depression at baseline

Incidence of Depression

27.4 (95%CI:22.2-33.5)
per 1,000 person-years

Factors Associated with Incident Depression

Factor	aHR (95% CI)
Living with HIV	1.97 (1.13-3.41)
Older age	1.04 (1.01-1.07)
PTSD	15.30 (8.51-27.54)
Thinking about suicide	11.27 (6.43-19.75)
Attempted suicide	2.84 (1.45-5.56)
Ill health without medical care	2.18 (1.33-3.58)
Genital ulcers	2.06 (1.11-3.80)



PTSD Sample

n=1929 participants without PTSD at baseline

Incidence of PTSD

17.3 (95%CI:13.3-22.2) per
1,000 person-years

Factors Associated with Incident PTSD

Factor	aHR (95% CI)
Having lived in ≥2 camps	2.62 (1.12-3.45)
Visiting ones' home community <1 time per month	2.62 (1.31-5.24)
Depression	2.67 (1.39-5.14)
Rape or sexual abuse	2.84 (1.35-5.96)
Thinking about suicide	16.98 (9.68-29.78)

Conclusion

- High incidence of probable depression and PTSD, despite time that has passed since the end of war in Northern Uganda.
- Lack of access to medical care and negative health outcomes, including HIV/STIs, were associated with depression, indicating need for wholistic care responding to both physical and mental health and wellbeing.
- Disconnection from home communities and sexual violence were associated with PTSD, highlighting importance of land-based cultural healing programs that address legacy of war on land tenure and socioeconomic conditions, contributing to predation.