

Contextualising Mental Health in South Africa

“An Overview of Mental Health in South Africa.”



OVERVIEW OF MH SERVICES IN SA



OVERVIEW OF MH SERVICES IN SA

- South Africa is the Southern most country in Africa
- The country is divided into 9 Provinces with decentralised governance
- The country has 11 official languages and sign language added as the 12th official home language
- Population of over 55 million people
- Population percentage split - black African 80.9%, colored 8.8%, white 7.8%, Indian/Asian 2.5% (2018 est.)



OVERVIEW OF MH SERVICES IN SA

- 💧 In SA, 75% of people with mental illness have no access to mental health services.
- 💧 The situation is compounded by abject poverty and serious lack of mental health resources.



MENTAL HEALTH IN SA



At the National Mental Health Summit in April 2012 in Pretoria the National Minister of Health, Aaron Motsoaledi stated that;

“According to the South African Stress and Health study, the first nationally representative epidemiological survey of common mental disorders in the country, published in the SA Medical Journal in 2009, **only one in four** South Africans with a mental disorder has obtained some form of treatment. This is in line with the World Health Organization (WHO) surveys that show that between **76% - 85%** of people with severe mental disorders in low-and middle-income countries receives no treatment.”

MENTAL HEALTH IN SA

Burden of Disease

- 12-month prevalence of **adult mental disorders** in South Africa - **16.5%** (SA National Stress and Health Survey 2002)
- 12-month prevalence of **child and adolescent mental disorders** in the Western Cape - **17%**
- For **People Living with HIV and AIDS** the prevalence of mental disorder was found to be **43%**



MENTAL HEALTH IN SA

Mental illnesses & neuropsychiatric conditions are ranked the **3rd highest** in contributing to the burden of disease in SA yet mental health remains a low national health priority with approximately only **4%** of the health budget spent on mental health services.



MENTAL HEALTH IN SA

It is a sad reality that budget allocations to psychiatric hospitals over a 5 year period range from 8-25% with a mean 5 year increase of 19% and a **mean annual increase of 3.8%** while the increase for general hospitals over the same period ranged from 29-54% with a mean annual increase of 10.2%. (SA Medical Journal 2010).



MENTAL HEALTH IN SA

Despite mental illnesses and neurological diseases contributing to the **3rd highest burden of disease** health budgets, both nationally and provincially, are disproportionately allocated to give preference to competing conditions such as TB and HIV/AIDS.



MENTAL HEALTH IN SA

Multiple barriers to the financing and development of mental health services exist, which resulted in:

- (i) psychiatric hospitals remaining outdated, falling into disrepair, and often unfit for human use;*
- (ii) serious shortages of mental health professionals;*
- (iii) an inability to develop vitally important tertiary level psychiatric services (such as child and adolescent services, psychogeriatric services, neuropsychiatric services, etc.); and*
- iv) community mental health and psychosocial rehabilitation services remain undeveloped, so that patients end up institutionalised, without hope of rehabilitation back into their communities. This state of affairs remains unchanged despite the legislated commitments to reform mental health care in the MHCA.”*



MENTAL HEALTH IN SA

Huge deficits and limited mental health services in rural communities complicated by the mal-distribution of equitable mental health human resources, inequitable financing and a bio-medical approach to primary health care which fails to consider serious socio-economic factors operating at the community level.





MENTAL HEALTH IN SA

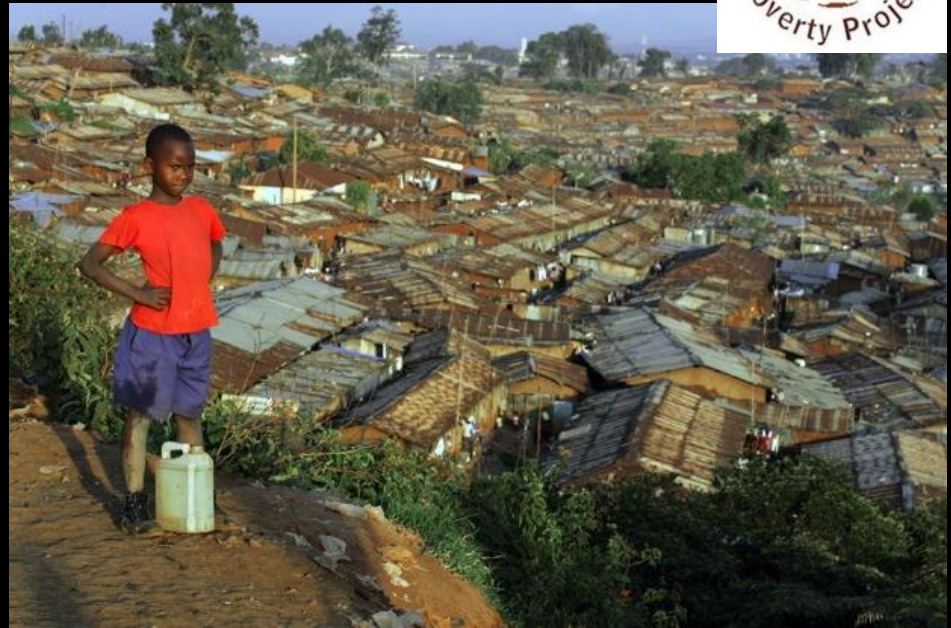


Mental Health and Poverty: Challenges in Service Delivery in Sub-Saharan Africa (SSA)

Global Mental Health and Africa:
Opportunities, Challenges and Collaboration

15th – 16th August 2011:
Mbarara University (Uganda)

*Fred N. Kigozi M.D
Senior Consultant Psychiatrist/
Executive Director, Butabika National Hospital*



Poverty and mental health interact in a negative cycle

MENTAL HEALTH IN SA

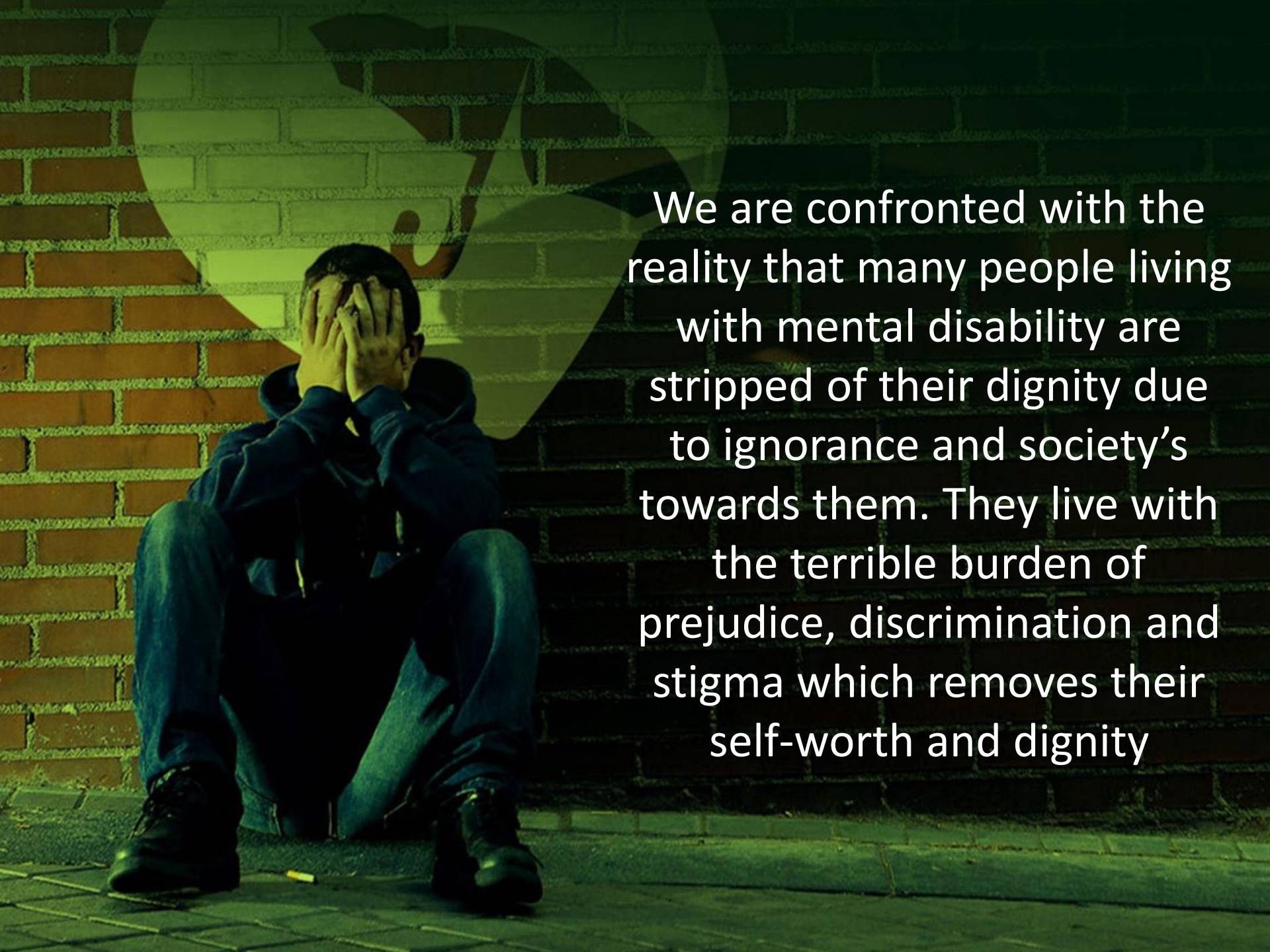
Costs

“The indirect cost of mental disorders outweighs direct treatment cost by two to six times in developed countries and may be even higher in developing countries. In the first nationally representative survey of mental disorders in South Africa, lost earnings among adults with severe mental illness during the previous 12 months amounted to R28.8 billion.²⁹ This far outweighs the direct spending on mental health care for adults (of approximately R472 million). In short, it costs South Africa more to not treat mental illness than to treat it.”



MENTAL HEALTH IN SA

- There has been prolonged and systematic neglect of mental health policy implementation as well as a lack of resourcing and lack of technical capacity
- Problematic inter-departmental collaboration and knowledge sharing in the realm of mental health care and service provision between various State departments
- Consistent under-prioritisation and under-provisioning of mental health care
- Considerable under-investment in mental health by the government
- Challenges in rural areas include lack of infrastructure, lack of human resource, stigma, medication stock outs, etc.,



We are confronted with the reality that many people living with mental disability are stripped of their dignity due to ignorance and society's towards them. They live with the terrible burden of prejudice, discrimination and stigma which removes their self-worth and dignity

REALITY CHECK

There is not a family, a community, a country or a culture where its members do NOT experience mental health problems, or live with intellectual disability or mental illness.



1 IN 4



*“The future depends on
what we do today.”*

Mahatma Gandhi





Bed shortage
leads to
high rate
of
re-admissions
due to
early discharge

BURDEN OF DISEASE
#1
HIV
#2
Other infections
#3
Mental illness

Make
MENTAL HEALTH
a priority!

"I sat on a
chair for 72
hours",
"Locked up
all night"

2013/10/07

CAPE MENTAL HEALTH



1913



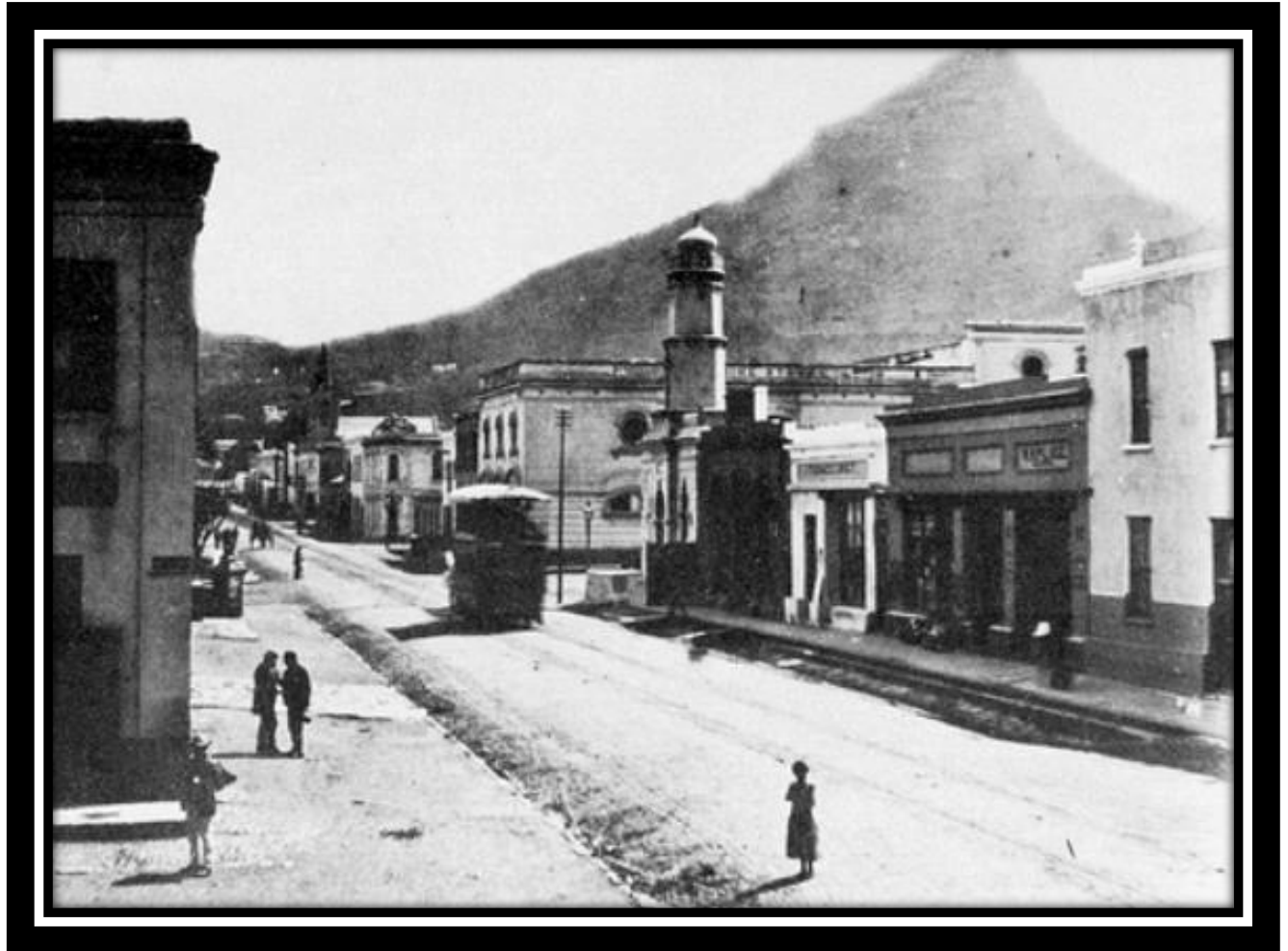
2019



Cape Mental Health
all about ability



106 YEARS AGO.....



24 June 1913, Cape Town



OVERVIEW

- Registered NPO and PBO
- One of 17 and the oldest MH Society in SA
- 2013 we celebrated our Centenary
- Affiliated to the SA Federation for Mental Health
- Founding member (1948) of the World Federation for Mental Health



Award Winning Organisation



all about ability

- Our vision is to provide or facilitate comprehensive pro-active and enabling mental health services in the **Western Cape**.
- We are committed to challenging socially restrictive and discriminatory practices affecting the **mental health** of all people. Our work is underpinned by a commitment to **quality, excellence and professionalism** at all times.



WESTERN CAPE REGION

WEST COAST

BREEDE
RIVER
VALLEY

CENTRAL KAROO

KLEIN KAROO

WINELANDS

CAPE TOWN

OVERBERG

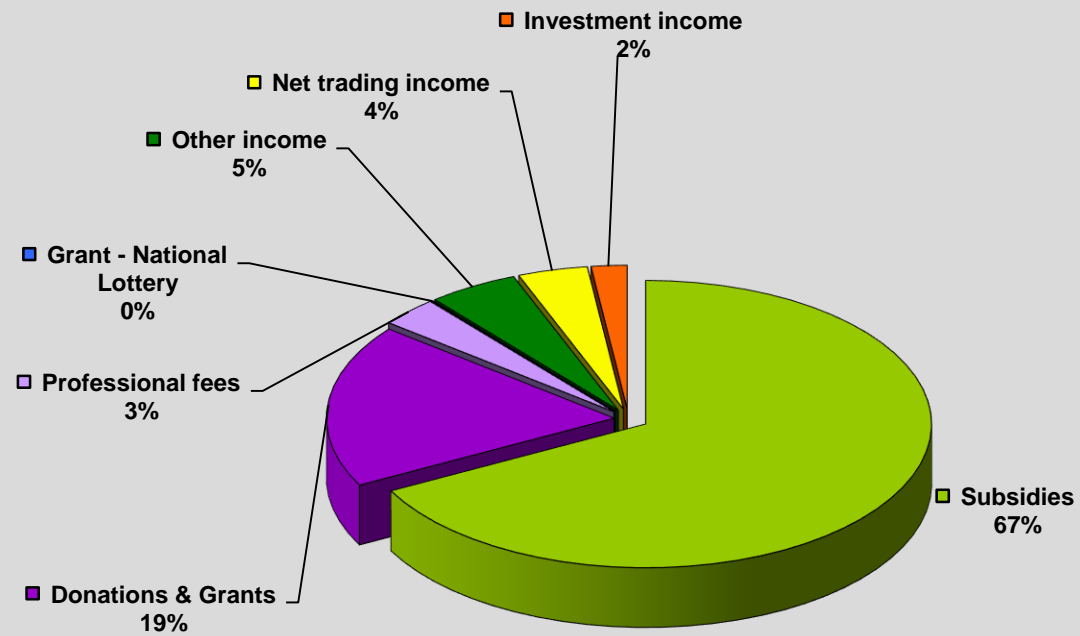
GARDEN ROUTE

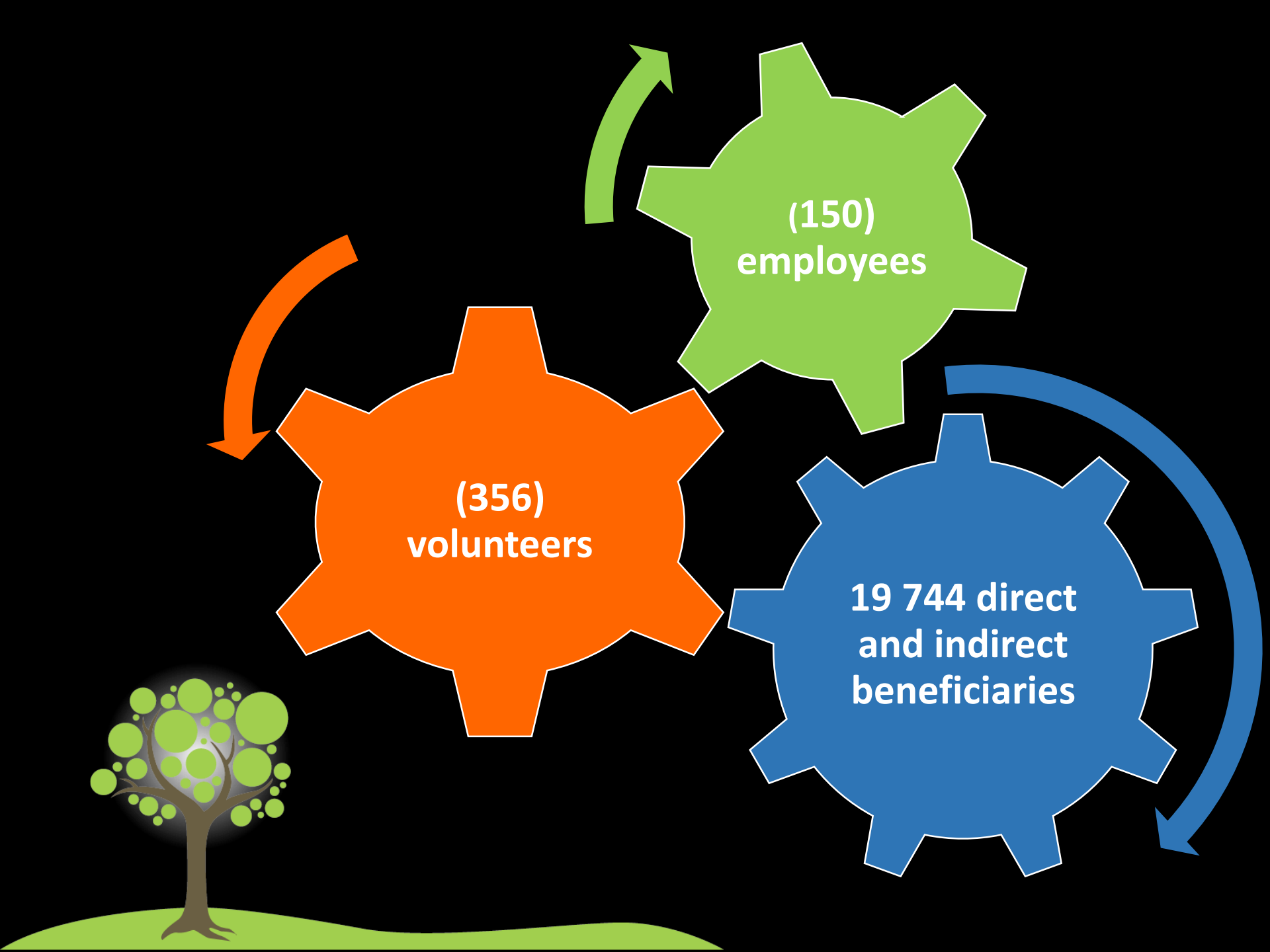


Persons with disabilities are full and equal
members of society, with inalienable
human rights – not objects of charity,
medical treatment and social protection.



CMH - Income 2018





OUR FOCUS





Counselling Service



Intellectual Disability



**3 Special Education &
Care Centres
180 children**



**2 Adult Centres for 30
persons with severe &
profound ID**



**4 Training Workshops
for over 600 Youth and
Adults with ID**



Cape Mental Health

all about ability

Eagles Programme

Adults with severe and profound intellectual disabilities, who graduate from our Special Education and Care Centres at the age of 18, had no opportunity for continued day services in the past. They returned home and became prisoners in their own homes waiting for the bus to fetch them each morning but to no avail. Their parents or caregivers often had to give up their employment to look after them full time. With their adult child, they became isolated from society. ***Left behind....***





Intellectual Disability



**Sexual Abuse Victim
Empowerment**

Intellectual Disability



Garden Cottage for 8
Women with ID



Intellectual Disability



Learning For Life Distance Learning Course in ID





Psycho-social Disability

**2 Fountain House – PSR
Vocational & Skills
Rehabilitation Centres**





Psycho-social Disability



**Rainbow Foundation 26
Community - based PSR Groups**



Psycho-social Disability



**Kimber House for 11
Residents**

Psycho-social Disability



Peer Support Programmes

Mental Health Promotion



**MindMatters
Schools-based Mental Health
Programme**



Mental Health Promotion



Advocacy & Lobbying



Mental Health Promotion



Public Education & Awareness

Mental Health Awareness

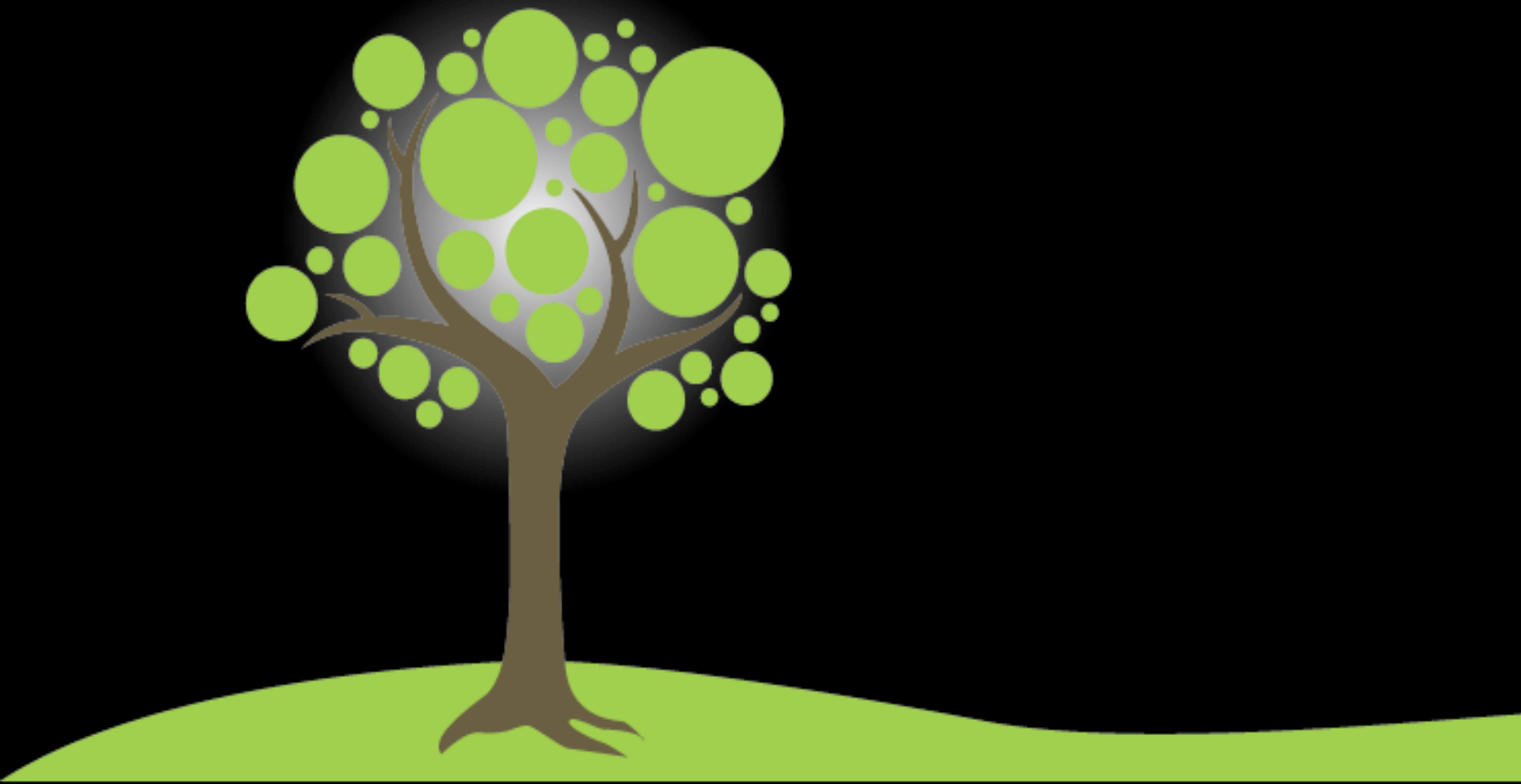
Cape Town International Kite Festival

26 & 27 October 2019









“Small acts, when multiplied by millions,
can transform the world”.



Thank you

Leave no-one behind



Cape Mental Health
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