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South African Society of Psychiatrists (SASOP)

CHILDREN'S MENTAL HEALTH CRISIS

Approximately one in seven children have a treatable mental health condition but most will carry the burden through to adulthood due to South Africa's chronic lack of

specialists and facilities to support their unique needs. The Covid-19 pandemic has worsened already-failing public mental healthcare for the country's

22 million children and teens, putting their ability to transition to a fulfilling and productive adulthood at risk, said psychiatrist Dr Alicia Porter, a board member of the South

African Society of Psychiatrists (SASOP).

Children and adolescents have not been spared from the mental health impact of the Covid-19 pandemic, with anxiety and depression symptoms in under-18s globally estimated to have doubled.

As the country marks National Child Protection Week (29 May – 4 June), Dr Porter highlighted that South Africa only has approximately 30 specialist child and adolescent psychiatrists, most in private practice where access is limited by affordability, while state-funded specialist child and adolescent mental health facilities are only available in Gauteng (four service units), Kwa-Zulu-Natal (one) and the Western Cape (two).

As a result, she said, it's estimated that only 10% of children and adolescents needing mental health treatment are able to access it.

Child Protection Week is an annual campaign to raise awareness of children's rights, especially their right to basic healthcare and social services.

"South African children's right to good mental health, and right of access to age-appropriate mental healthcare, is already being failed by the public healthcare system and has been worsened by the impact of the Covid-19 pandemic.

"In South Africa we are completely unable to meet the mental health needs of children and adolescents, and we as psychiatrists have been calling for urgent action for a long time. We need to act now to protect the next generation and prevent the socio-economic consequences of poor mental health," Dr Porter said.

Mental health conditions are the leading cause of illness and disability in children and teens, and 50-80% of adult mental

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health disorders originate in childhood, impacting on physical and mental health, increasing the risk of substance abuse, and limiting opportunities for education and employment.

Mental health professionals expect that the disruption to family and school routines, fear of being infected or losing loved ones, isolation and lack of social contact that accompanied the pandemic will have a long-term negative impact on children's mental health and extend into adulthood.

Meanwhile, a lack of understanding and acceptance of mental health leads to families who do seek help often being stigmatised within their extended families, communities and the healthcare system, with psychiatric problems viewed as the child "just being naughty" or "just going through a phase", and the result of poor parenting, she said.

"We have a national mental health policy that provides for the needs of children and adolescents, but it has been poorly resourced, not implemented at provincial level, and is now outdated.

"Child and adolescent mental health is not prioritised, which is reflected in the lack of dedicated funding, human resources and facilities, and frequent unavailability of psychotropic medication. This is worsened by the lack of insight

and understanding of what child and adolescent mental health entails and what services are needed," Dr Porter said.

In addition, she said, in the face of inadequate resources and capacity, the government over-relied on non-profits to compensate for the lack of public services.

"Government also tends to work in silos, making it difficult to manage cases that require collaboration and cooperation of the departments of health, education and social development," she said.

The key priorities highlighted by psychiatrists to be addressed if South Africa is to improve child and adolescent mental healthcare are:

- Updating of policy, and enabling implementation across all provinces through greater investment in specialised child and adolescent mental health facilities and services.
- Improving intersectoral collaboration across the departments of health, basic education and social development, and enabling multi-disciplinary team approach to managing cases.
- In order to aid with mental health promotion and awareness, as well as screening and early detection, primary care nurses should receive training in mental health specifically focused on

how these conditions present in children and adolescents.


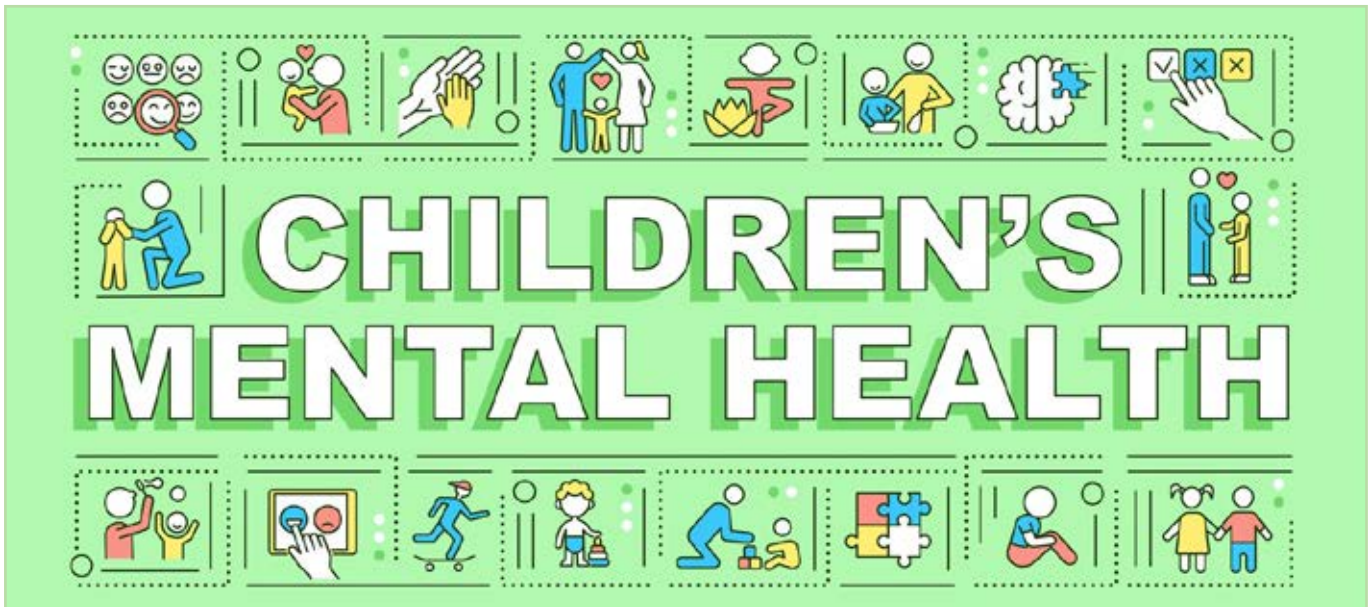
- Similarly, teachers should be trained in identifying mental health conditions, in mental health promotion and in basic counselling, while mental health skills training should form part of the school

curriculum in order to assist with building coping skills and resilience in children and teenagers.

“South African children’s rights in the mental health sphere will only be fully realised if we move beyond policies to full implementation with investment

in training, staffing and facilities that make appropriate treatment accessible to the most vulnerable in our society,” Dr Porter said.

References available upon request



WHAT SUPPORT OR HELP IS AVAILABLE?

24 Hour Helpline 0800 21 21 21 for Free telephonic counselling and crisis intervention run by Dedicated HWCN & SADAG counsellors.

Training and support of more than 500 volunteer mental health professionals who support the network.

Dedicated SMS (43001) line for healthcare workers for a dedicated SADAG Counsellor to call you back.

A dedicated website with support services contact details, videos, webinar recordings, resources, psycho-education capability, guidelines, links, and support information.

Online request forms for support and counselling are accessible through the HWCN website, the SAMA page, the EMGuidance App as well as the Vulamobile App.

24-hour Healthcare Workers Care Network Helpline
0800 21 21 21 or SMS 43001
www.healthcareworkerscarenetwork.org.za

