

Lessons not learnt: Public mental health still in a dismal state

 By [Nicci Botha](#)

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It appears that the [Esidimeni](#) tragedy has not had impact on improving the care of public sector mental health patients. In fact, it's seems to be getting worse.



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The [Daily Maverick](#) has reported that the Gauteng department of health is planning to cut subsidies to about 160 NGOs, some of which take care of mentally ill patients. One of these homes has taken the department to court to reinstate the funding.

Meanwhile, the critical situation found in state mental health hospitals has still not been addressed, including the issues raised in the health ombud's report in February this year. The South African Society for Psychiatrists (Sasop) Public-Sector Psychiatrists' forum has therefore instituted reporting on the state of care in their respective regions.

"The result is appalling and acts as a second call from Sasop for an overhaul of the mental health care system in all the provinces," the organisation said in a statement.

Limpopo and the Eastern Cape suffer the most severe lack of resources, says Professor Bernard Janse van Rensburg, president of Sasop.

Hospitals hopelessly understaffed

"Only six public sector psychiatrists serve the whole of Limpopo, mainly from general hospitals. Hayani hospital, a 390-bed mental health specialist hospital, where in 2016, a psychiatric nurse was killed by an inpatient, has currently no psychiatrist.

“Child and adolescent psychiatric care is non-existent in the Eastern Cape and Limpopo province, and in all provinces, psychiatrists have to admit children and adolescents unlawfully into adult psychiatry wards. No province currently has an organised community-based psychiatric service.”

The report found Mpumalanga and the Northern Cape has no public-sector psychiatry representation whilst in KwaZulu-Natal a massive specialist staffing crisis exists whereby only 20 of the 45 specialist posts are filled.

Human rights under threat

“With physical beds missing, others not in use due to flooding of wards caused by the non-repair of damaged roofs post a storm in 2015, and no water or food at some hospitals such as Umzimkhulu in KwaZulu-Natal as found at so many others across the country, the most fundamental basic human rights of patients are under threat.”

Janse van Rensburg says the Eastern Cape is struggling with a dearth of general hospital beds to accommodate acute psychiatric admissions and in most regions the inability to deal with aggressive behaviour by severely mentally ill people has resulted in long waiting lists for forensic psychiatric services.

Key legal structures missing

Other common themes that emerged were an absence of mental health directorates in five of the nine provinces and that mental health review boards are generally dysfunctional in all provinces.

“These are key structures provided for by the Mental Health Care Act of 2002, to protect the human rights of those patients whose disability or acute illness renders them unable to stand up for themselves. However, there is a gap in this role, in that such patients living in the community may not be perceived to require such protection.”

Community-based care

“The health ombud’s report recommended some action to be completed within 45 days, yet 150 days later, it is glaringly apparent that the general poor access to both physical and mental healthcare at community level remains unaddressed, and no comprehensive remedial strategy has yet been tabled in Gauteng, or elsewhere. Our own report now serves as a second call for action to be taken.

“While almost all the previous Life Esidimeni patients have been transferred from the NGOs in Gauteng back into hospital, we are still awaiting positive action on other important recommendations made by the health ombud.

“Notably, Recommendation 16, referring to the whole mental health system which should include resourced, developed community-based primary and specialist multidisciplinary teams. The reality however is that the health system still does not cater adequately for the thousands of people who continue to live with mental illness within the community.”

ABOUT NICCI BOTHA

Nicci Botha has been wordsmithing for more than 20 years, covering just about every subject under the sun and then some. She's strung together words on sustainable development, maritime matters, mining, marketing, medical, lifestyle... and that elixir of life - chocolate. Nicci has worked for local and international media houses including Primedia, Caxton, Lloyd's and Reuters. Her new passion is digital media.

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