

SEEKING JUSTICE: Prior to the closure of the Life Esidimeni homes, which resulted in the deaths of at least 144 mentally impaired patients, families marched to the Gauteng Department of Health to hand over their memorandum to then Gauteng Health MEC Qedani Mahlangu. The Gauteng health department shut down the facility without consulting the families. PICTURE: DUMISANI SIBEKO / AFRICAN NEWS AGENCY ARCHIVES

TIM HART

RIMINAL prosecutions have been threatened in the wake of the decision last month to award R1.2 million to each of the families of the at least 144 mentally impaired patients who died after they were moved from Life Esidimeni into ill-equipped NGOs and state facilities in 2016.

In addition, Gauteng's health department continues to try and track down the 44 other patients whom it terms "unlocated" and claims this number has now dropped to 28.

However, the claims and counterclaims of graft and the crime and punishment discourse swirling around the scandal have tended to obscure the underlying prejudice, lack of care and misunderstanding that, in many ways, underpinned the gross abuse that killed the Life Esidimeni patients.

In this context, the broader failure to address and treat the mental health problems that about 16 million South Africans – one third of the population – will experience during their lifetimes is evidenced by the country's startling suicide rate. About 23 South Africans kill themselves every day and for each suicide another 10 people attempt it, with devastating social and emotional effects for themselves, their families, friends and peers.

Those who suffer from mental health impairments are among the most vulnerable people in any society and their relative powerlessness can lead to grossly inadequate care and breaches of their fundamental human rights. When the prejudices against those with mental health impairments are exacerbated by those based on race, creed, gender, age and socio-economic class, their vulnerability is heightened.

South Africa's history of structural racism and rising violence in rural and urban areas has, and continues to have, an impact on all South Africans and demands greater recognition of, and respect for, the plight of those who cannot mentally cope. They should be treated with the dignity they deserve.

However, in the absence of such respect, only 20% of mental health sufferers are likely to seek help because of stigma or a lack of awareness about what constitutes a mental health impairment. Mental, neurological and psychological

Lessons from Life Esidimeniapply to workplace

Mentally impaired are entitled to dignity



IN CHARGE: Retired deputy chief Justice Dikgang Moseneke heads the arbitration hearings between the State and the families of victims of Life Esidimeni. PICTURE: NOKUTHULA MBATHA/AFRICAN NEWS AGENCY (ANA)

TESTIMONY: Suspended Gauteng director of mental health Dr Makgabo Manamela testifies during the Life Esidimeni arbitration hearings in Johannesburg. PICTURE: ITUMELENG ENGLISH/AFRICAN NEWS AGENCY (ANA) impairments vary in severity. Some

with susceptibility increasing with are considered temporary, such as age (for example, dementia). acute stress disorder, which is char-The workplace has been increasacterised by the onset of severe anxiety and dissociation about a month

ingly identified as a contributor to the complex interaction of social, psychological, biological and environmental factors that can create mental health problems. Excessive or insufficient, con-

fusing or monotonous workloads can create feelings of inadequacy and worthlessness. An increasing lack of participation and control in the workplace, arising from dehumanisation as the emphasis is placed on profits and turnover, can compound such feelings. Poor leadership and communication can

damage interpersonal relationships and exacerbate working conditions. Tensions between home and workplace demands can add to pressures.

The 1998 Employment Equity Act extends its protection to those with a long-term or recurring mental impairment as people with a disability. They are also protected under the Promotion of Equality and Prevention of Unfair Discrimination of 2000. Inclusion in these Acts indicates that the government recognises that while physical disability can result in mental health challenges (for example, depression), mental impairments are no less significant than physical ones.

Accordingly, employers are required to ensure that programmes are established to promote the mental health of workers, and to ensure that mental health problems are diagnosed and treated effectively and the sufferers are accorded dignity.

However, this assumes that leaders and human resources staff are sufficiently skilled and capable. A key challenge is to help people with mental health and physical impairments feel comfortable enough to talk about their concerns, particularly since it can be hard even to share these with their families.

Encouraging workers to divulge such information is about more than meeting employment equity targets, it is about supporting people properly in the workplace.

Workers and employees should not feel embarrassed or ashamed of possibly experiencing the debilitating effects of mental health or neurological impairments in the workplace. It is in everyone's interests that colleagues be aware of why a person is behaving in a particular way. Workplace and public health education is vital in this respect.

It is also important not to overlook the plight of those people without jobs. They can suffer depression and mental health impairments due to the burdens of joblessness, which include decreasing self-esteem, the stress brought on by the inability to pay for basic needs, the absence of social networks that ensure employment and the lack of daily structure. They can end up in public mental health programmes.

The pursuit of justice for the Life Esidimeni victims and their families is crucial to send a warning. But government and the rest of society needs to do much more to prevent this type of tragedy from happening again. In order to ensure that the rights of the most vulnerable members of society are respected, the shared humanity of those with mental health impairments must be recognised, particularly in the workplace. In this context, a society and social care system that can kill 144 people and lose another 28 is nothing short of inhuman.

The message that should rather be sent out is that all of us, regardless of impairment, should be valued for our individual and common humanity and treated accordingly.

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(for example, an act of violence). Others are periodic, such as the periods of exaggerated elation followed by extreme depression that are experienced by people with bipolar condition. Still other mental impairments are permanent and progressive, such as Alzheimer's disease. The causes of mental impairments vary and can relate to life-

style practices and behaviour, lived

after exposure to a traumatic event

experiences and traumatic episodes,

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