

Mental health awareness:

Not simply adherence to Acts, but about dignity

More than a fifth of South Africans will suffer from depression at some stage during their life but two-thirds of them will not get the support they need. According to the South African Depression and Anxiety Group (SADAG), approximately 23 people commit suicide every day and for each complete suicide another 10 people attempt it. *Tim Hart* reports.

Worldwide, an estimated 400 million people suffer from some form of mental health disorder. In South Africa, an estimated one third of the population has or will experience a mental health disorder, but only 20% of those will seek support.

Much of this has to do with the stigma attached to acknowledging feelings of depression, as well as awareness of what constitutes a mental health problem. However, if recognised and acknowledged most mental health disorders can be treated.

October was Mental Health Awareness Month and from 10 September to 10 October (World Mental Health Day), numerous organisations representing government and civil society reached out to increase mental health awareness and education. They pushed for advocacy to reduce the social stigma associated with mental, neurological or psychological disorders.

Defining mental health impairment

Definitions of mental health impairments in South Africa are based on the American Psychiatric Association's 2013 *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. Like physical impairments, mental, neurological and psychological impairments vary in severity. Some are transient or temporary, like acute stress disorder, characterised by the onset of severe anxiety and dissociation about a month after exposure to an extremely traumatic event (e.g. violence of any form). Others are periodic, such as the periods of exaggerated elation

followed by periods of extreme depression as in the case of people with a bipolar mood disorder. There are also permanent and progressive mental impairments, such as Alzheimer's disease, a form of dementia.

Causes vary and can relate to lifestyle practices and behaviour, lived experiences and traumatic episodes during one's lifecycle and lifecycle stage, with susceptibility becoming increasingly probable, as one gets older.

Research shows the content and context of the workplace can contribute to the growth of work-related mental health challenges

The workplace

Because mental health problems stem from the complex interaction of social, psychological, biological and environmental factors, research has increasingly produced evidence that the content and context of the workplace can contribute to the growth of work-related mental health challenges. According to the Department of Health, key factors include an excessive or insufficient workload, lack of participation and control in the workplace, monotonous or unpleasant tasks, role ambiguity or conflict, lack of recognition at work, and inequity. Poor interpersonal relationships, poor working conditions,

poor leadership and communication, and conflicting home and work demands also play a role.

Recognising the challenges of the modern workplace and the effects it can have on individuals, the government emphasises that employers must ensure programmes are in place to promote the mental health of workers and to ensure that mental health matters are recognised early and people afflicted with mental health challenges are treated effectively and with dignity.

Furthermore, the Employment Equity Act 55 of 1998 (EEA) includes people with a long-term or recurring mental impairment as people with a disability. This ensures that they are protected in terms of this act and also the Promotion of Equality and Prevention of Unfair Discrimination Act 4 of 2000. It also suggests that government recognises that while physical disability can result in mental health challenges (e.g. depression), physical impairments are not any more significant than mental impairments, despite the latter often being less visible.

Disclosing

One of the challenges that remains for people suffering from mental health impairment, as with those suffering from physical impairment, is to feel comfortable to inform their employers of this situation. It is difficult enough sharing this emotional information with family members. The purpose of acknowledging the presence of any disability should not only be to address the targets of

either the EEA or the Broad-Based Black Economic Empowerment practices. It should be to make people feel secure, comfortable, respected and treated with dignity by their co-workers, including management, and despite possibly experiencing episodic bouts of the debilitating effects of mental health impairments in the workplace. In fact, it makes sense that colleagues be aware of why a person is behaving in a specific way. Awareness and education are vital in this respect.

In a country such as South Africa with its history of racism and increasing criminal and structural violence in both rural and urban areas, alongside the gross intolerance of difference,

we must acknowledge the mental health impacts of both past and present acts of violence, intimidation, discrimination and the daily stressors of contemporary South African society. None of us can claim to be free of these events and their lasting effects. More than acknowledgement, we must be in a position to deal with the severely afflicted with the dignity and respect they deserve.

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For more information or advice on mental health issues, please contact:

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