

**Speech by the KZN MEC for Health Dr Sibongiseni Dhlomo on  
the occasion of PROVINCIAL MENTAL HEALTH SUMMIT**

**19 March 2012**

Programme Director

Acting GM – Dr Jimmy Mthethwa

Mental Health Programme Manager –Dr Bonginkosi Buthelezi

Invited guests

Colleagues and friends

We recognize the intensive work done by the conveners in preparation for this first ever KwaZulu Natal Mental Health Provincial Summit. We profusely thank Dr Bonginkosi Buthelezi and his team for ensuring inclusivity of all stakeholders as we acknowledge the presence and participation of Academics; Researchers; Traditional Leaders; Traditional Health Practitioners; Unions and every significant player here.

Programme Director, I hope we are all in the same wavelength in understanding that this Summit comes as a result of our Health Minister, Dr Aaron Motsoaledi's directive that Provinces must meet in preparation for the National Mental Health Summit scheduled for the end of this month. In giving justice to this call, we are then expected to embrace the theme for this event which is: *INVESTING IN*

*MENTAL HEALTH FOR A LONG AND HEALTHY LIFE FOR THE PEOPLE OF KWAZULU NATAL.*

Expected of us in this two day gathering is that we:

- Engage as Mental Health Care Stakeholders
- Take stock of the progress made in transforming the mental health system
- Identify key challenges in this sector
- Identify and prioritize areas of key interventions
- Come out with resolutions that will be taken to the National Summit

Before we get serious with the deliberations of the day I feel led to thank and appreciate the progressive and compassionate role that is being played by the Non Profit Organizations and various Non-Governmental Organizations in giving care and support to this sector that consist of the most vulnerable and often ridiculed members within our communities. Indeed we need to state and maintain that it is the responsibility of each and every community member to give assistance to those that are troubled. Let us all contribute in doing good things and not ask, for whom!

Programme Director, as we deliberate in the coming two days we also need to focus on the effects and impact of mental disorder on children as we know that childhood and adolescent disorders are on the increase given the current psycho socioeconomic climate that we

find ourselves in. Violence, trauma, poverty and unemployment, HIV and AIDS, crime, sexual abuse and substance abuse have all created a breeding ground for psychiatric and psychological problems for innocent and vulnerable children.

Programme Director, we have a critical task in this province to increase awareness about mental health. We have a duty to transform mental health services to ensure that they comply with the culture of human rights that has been ushered in through the introduction of the Mental Health Care Act No. 17 of 2002 (MHCA).

I have to say that the Department of Health is making a significant progress in complying with the Act and improving the mental health services in the following manner:

- We have designated health establishments to function as mental health facilities that provide care, treatment and rehabilitation to the Mental Health Care Users (MHCUs);
- We have established Mental Health Review Boards (MHRBs) which are independent quasi-judicial bodies charged with overseeing care, treatment and rehabilitation of the Mental Health Care Users who are admitted without consent;
- We have trained health care professionals on various new procedures and processes that were introduced by the Mental Health Care Act. However, there is a need to continue with this

- training to ensure that our staff understand and adhere to the new procedures for admission, referral, and reviews; and
- We have somehow mobilized resources to improve compliance including revitalisation of health facilities.

While we continue to make progress in improving the environment for Mental Health Care Users, there are a number of challenges still faced including inadequate infrastructure; lack of human resources and compliance with the 72-hour assessment and integration of mental health into primary health care, just to mention but a few.

Programme Director, it is exactly for the deficiencies stated above that we have invited all of you as stakeholders and experts in mental health to assist this summit in taking stock of the progress made, identifying key challenges, proposing practical interventions and coming out with resolutions that will take mental health to another level in this province.

Our theme for this summit is relevant for the dialogue that is to take place here as indeed our country's Constitution and the Mental Health Care Act give our people including the Mental Health Care Users and their families, hope for long and healthier lives. All of us here assembled agree with the saying that there is no health without mental health.

We are also unison in the understanding that mental disorders are inextricably linked to human rights issues. As we will be celebrating the Human Rights Day on the 21<sup>st</sup> of March, we then need to spare a thought for our Mental Health Care Users who are on the receiving end of stigma, discrimination and human rights violations. They are still facing limitations to social equity, equal opportunity and care. Many of these limitations are a direct result of neglect and inhumane laws of the past.

It is an undeniable fact that previously mental health care services lacked a human rights culture; were fragmented; under-resourced and inequitably distributed. There was reliance on chronic custodial treatment in large centralized institutions. In communities where services were non-existent, people were chained like wild animals.

In keeping with the spirit of our country's Constitution, we all are under an obligation to correct the transgressions and prevent further abuses. For that I am even tempted to refer to our 2006 Mental Health Awareness Campaign theme whereby we declared: **“Don't fear those experiencing a mental illness. It can happen to anyone. Dare to challenge the myths and the misconceptions.”**

With the colleagues from the media here present we hope that messages will go around for everyone to understand that anyone can suffer from mental illness as by definition we refer to mental illness

as a disease that causes mild to severe disturbances in thinking, perception and behavior.

Let us work together in coming up with means and ways that will make us succeed in providing an appropriate environment within which care, rehabilitation and after care can take place.

Without collaboration and cooperation as different sectors and stakeholders, we will never succeed in our quest to fully integrate people with mental disorders into community life.

Let us also pool resources both financial and human to realize the noble goals we all have for this sector as we say “in partnership with all stakeholders and role players, we can invest in mental health for long and healthy lives for the people of KZN.”

Lastly, ladies and gentlemen, let us work together to ensure that resolutions that come out of our deliberations do contribute towards full compliance with the Mental Health Care Act.

I, therefore, urge all of us to work hard in our commissions for the next two days and advocate for the issues that affect mental health that will inform our plans and contribution to the National Health Summit.

I thank you