

Rural Mental Health and Occupational Therapy



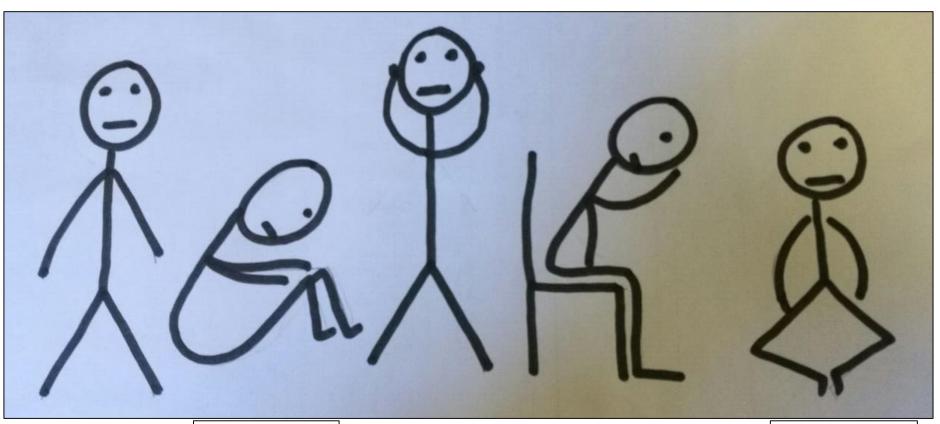
Shannon Morgan

Mental Health
Symposium

WFOT Congress 2018

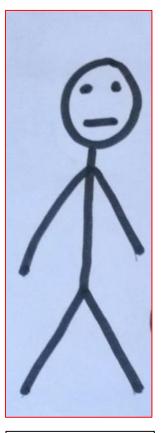


Case study: Sidumo's Family



SIDUMO'S WIFE INTELLECTUAL DISABILITY

ANGA 18 YRS AWAITING DIAGNOSIS SIDUMO 65 YRS SCHIZOPHRENIA DISTRESS SIYABONGA 36 YRS SCHIZOPHRENIA NOT WORKING SIVE 13 YRS NOT SCHOOLING



NOMONDE CAREGIVER TO ALL

There can be no health for all without mental health (Prince et al, 2007)

• In South Africa, 52% of the total population and 75% of poor South Africans live in rural areas. (Reid, 2006)

• 1 in 4 South Africans have <u>NO</u> access to treatment for mental disorders (Hermann et al, 2009)

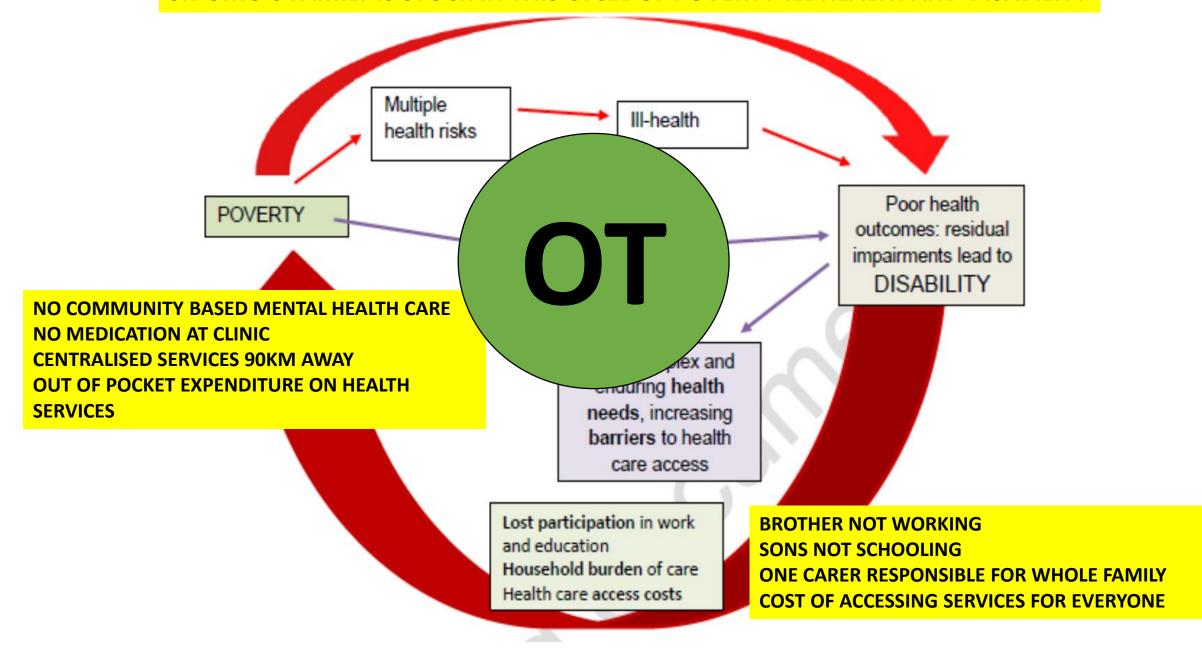


 Rural communities are prone to social and economic disadvantages, which are risk factors for depression (RHAP,2015).

 Rural populations do not have equitable access to mental healthcare services

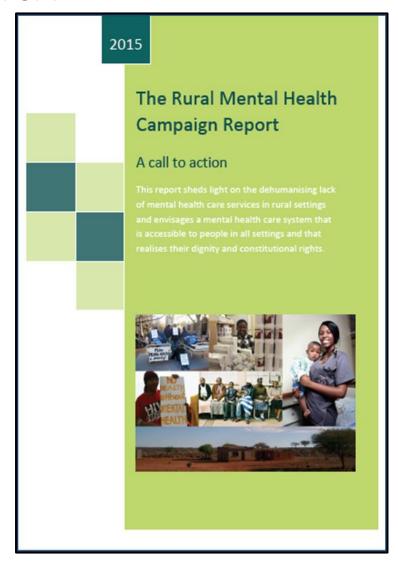


SIDUMO'S FAMILY IS STUCK IN THIS CYCLE OF POVERTY-ILL HEALTH AND DISABILITY



Human Resources for Mental Health

- 84% of the population accesses public sector health services which is served by 30% of the country's doctors.
- The private sector only accounts for 16% of the population but is served by 70% of the county's doctors.
- In South Africa only 12% of doctors and 19% of nurses work in rural areas.
- There are seven times more psychologists and three times more occupational therapists in the private sector.



Mental health workforce crisis

Task shifting- Community Health Workers, Midlevel Rehabilitation Workers, Home based carers

Task shifting (also known as task sharing), defined as "delegating tasks to existing or new cadres with either less training or narrowly tailored training", is an essential response to shortages in human resources for mental health.

This process can entail: employment of mental health care providers in different sectors; intersectoral collaborations with other professionals, such as teachers and prison staff, to strengthen mental health awareness, detection of mental disorders, referrals, and service delivery; or both of these. (Kakuma et al, The Lancet, 2011)



Friendship benches

"Outside a clinic in Highfield, a poor suburb just south of Zimbabwe's capital Harare, there are lots of grandmothers – trained but unqualified health workers – who take turns on the park bench to hear stories. They listen to the battered wife who has attempted suicide twice, the man who hates women after he became infected with HIV, the unemployed single mother driven to despair by the struggle of raising four children."



Photograph: Bhekisisa article, Cynthia R Matonhodze

The role of OT in mental health?

 Lack of psychosocial rehabilitation, resulting in poor recovery and "revolving door" care

 Community based mental health care services can address shortage and high turnover of health professionals in rural areas



The Rural Ability Programme



Community Based Inclusive Development (CBR)

- Participation and Inclusion
- Health, Education and Livelihoods
- ALL people with disabilities

6 Community Disability Workers-

- generic mid-level rehabilitation workers
- Still the same team since 2014
- From local communities
- Training from OT/PT/SLT/Audio/Counselling/Paralegal training/Human Rights Training



Community Based Mental Health Care

"The importance and benefits of the **psychosocial support** that Community Disability Workers give their clients and families should be recognised in project documentation, perhaps becoming another result area of the programme. This is a very positive aspect of the Rural Ability Programme and should be documented." (CREATE, 2016)



As a global community of Occupational Therapists would we be ready to engage with task sharing of OT skills and competencies in order to meet the significant need for mental health services in the world?



Can there be mental health without OT?

This symposium is the START of the conversation...

Thank you



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