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Joint press statement issued by the Children's Institute (University of Cape Town), Centre for Public Mental Health (University of Cape Town), Centre for Autism Research in Africa (University of Cape Town), Institute of Life Course Health Research (University of Stellenbosch), and the South African Association of Child and Adolescent Psychiatry and Allied Professions

High levels of adversity increase children's risk of developing mental health problems

Tomorrow, June 1, marks the intersection of Child Protection Week and Youth Month. As we focus attention on the needs of young people in the lead up to June 16, we are calling on the State to put the human and financial resources in place to close the treatment gap and deliver on young people's right to mental health services. Child and adolescent mental health is the foundation of a strong, vibrant and caring society. Yet far too many of our youth are struggling with their mental health and unable to access care and support. The recently released National Mental Health Policy signals government's commitment to prioritise the needs of children and adolescents, but we also know that child and adolescent mental health services are in crisis and that recent cuts in health care spending pose a further threat to service delivery.

The burden: one in 10 children have a diagnosable and treatable mental disorder

Nearly a year has passed since the [South African Child Gauge](#) focused attention on children's mental health. This annual publication of the Children's Institute, University of Cape Town, highlighted how South Africa's children are exposed to extraordinarily high levels of adversity which increase their risk of developing mental health problems. Two-thirds of children (63%) in South Africa live below the upper-bound poverty line¹. Nearly one in two children (42%) have experienced violence, including physical violence (35%) and sexual abuse (35%). In some parts of the country, almost all children have either witnessed or experienced violence in their homes, schools and/or communities.

It's therefore not surprising that more than one in 10 children in South Africa have a diagnosable and treatable mental disorder. This includes depression, anxiety, post-traumatic stress disorder; conduct, learning and substance-use disorders; and neurodevelopmental disorders such as ADHD² and autism.

Mental health problems in young people not only cause distress for children and their families. They interfere with children's ability to function in everyday life.

Without the necessary support, children may struggle at school with higher rates of absenteeism, grade repetition and dropout, undermining their education and economic prospects. Others may start to self-medicate with substances or resort to self-harm to cope with their symptoms, or they may channel their anger and distress outwards through disruptive, harmful, and, some instances, criminal behaviour.

¹ The upper-bound poverty line allows just enough money for basic nutrition and other essentials such as clothing and shelter.

² Attention Deficit Hyperactivity Disorder

In this way, our failure to support children's mental health can ripple out across their lives – and across generations.

Early intervention is key

Half of all adult mental disorders begin before the age of 14 years. So, we need to intervene early in childhood and adolescence.

The national Department of Health recognised this as far back as 2003, when it released its Child and Adolescent Mental Health Policy to strengthen services and support for young people. Yet 20 years later, child and adolescent mental health services remain grossly understaffed and underfunded:

The treatment gap

- There are only 15 child and adolescent psychiatrists working in the public health system. In most communities, mental health services for young people are simply unavailable - leaving nine in every 10 children with a diagnosable mental disorder unable to access treatment.
- Few health facilities have dedicated facilities for children and adolescents with acute mental illness. As a result, adolescents are kept in adult wards where they may be exposed to adult psychiatric patients and assessed by staff who lack the appropriate skills and expertise.

Recent developments

In April this year, we welcomed the release of the new National Mental Health Policy Framework and Strategic Plan 2023 – 2030, and the Department of Health's commitment to prioritise child and adolescent mental health. But we remain wary that these may be empty promises and that children's needs may again get side-lined following cuts to government spending on health care services.

Policy commitments alone will not be enough to close the treatment gap. They need to be underpinned by dedicated budgets and implementation plans, and strong leadership at provincial level. And they need to be incorporated into the baskets of care funded by medical aids and National Health Insurance.

A call to action

For this reason we are calling on all those who care about young people's mental health to [sign our petition](#) calling on the Minister of Health and Minister of Finance to put the necessary resources in place as outlined in the 2003 Child and Adolescent Mental Health Policy, and to:

1. Radically increase the number of facilities offering child and adolescent mental health services.
2. Ensure these services are private, confidential and open at times that work for children and adolescents.
3. Involve young people in the design of child- and adolescent-friendly services.
4. Develop a set of children and adolescent mental health service standards to facilitate monitoring and evaluation.
5. Invest in the training, supervision and support of health workers at primary levels of care so that they can screen and treat children with common mental disorders and refer those requiring more specialised care.

6. Scale up specialised training of child psychiatrists, child psychiatric nurses and psychologists and social workers.
7. Establish provincial leadership and ringfenced budgets to drive the implementation of child and adolescent mental health services on the ground.

We cannot afford to still be asking the same questions in 2043. The time to act is now.

ENDS

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For further information, see the [*South African Child Gauge 2021/22*](#)

Note for editors:

Please share the petition URL with your listeners/readers:

<https://awethu.amandla.mobi/petitions/demand-better-mental-health-services-for-our-children>