

Foreword

Linda Richter

Emeritus Professor, DSI-NRF Centre of Excellence in Human Development, University of the Witwatersrand

This 2022 issue of the *South African Child Gauge* focuses attention on promoting child and adolescent mental health and well-being. It also addresses the unhappiness, isolation, shame, anger and fear which we all feel at some time in our lives along a continuum from mild to moderate and extreme forms of mental distress. It looks at how experiences, feelings and behaviours can worsen, persist, evolve and, amongst a minority of children and adolescents, find expression in longer-term and even life-long mental disorders.

The wide spectrum of mental distress makes it difficult to estimate how many children and adolescents may benefit from early intervention to reduce the potential for mental health problems; how many young people are already affected and may need additional care and support from families, schools and trained counsellors; and how many would benefit from specialised psychological treatment, medication or support to promote their recovery and participation in everyday living, learning, working or socialising across a significant period of their lives.

The prevalence rates we use frequently rely on diagnosable forms of mental disorder, but the vast majority of children and adolescents in the world do not make it to a specialist office or receive a diagnosis. Children and adolescents who suffer mental distress and those who love, live or work with them know only too well how stressful it is for everyone involved and how difficult it is to find support and treatment for the young people in our care.

Children and adolescents affected by mental ill health are themselves often not able to talk about their feelings and what help they need; for example, the trauma and confusion experienced by a baby who is neglected or abused, the angry biting and scratching of a toddler, the grief of a schoolchild teased and rejected by peers, the need for recognition

expressed in violence and aggression, the inconsolable loss of a loved family member or friend, or a teenager's desperate search for means to end a life which seems unbearable in the face of all that feels wrong.

What we do know is that disturbed and disturbing thoughts, feeling and behaviours can be experienced at all ages, starting in infancy, and that they are shaped by a variety of physical, social and psychological factors. The undernourished child living with a poor family may be withdrawn and clinging, just as a confused and anxious teenager may struggle to adjust between seemingly uncontrollable feelings and bewildering physical changes.

So how can we respond to children's distress appropriately and enable them to thrive in the face of adversity? The paediatrician Donald Winnicott asserted that powerful loving relationships are at the heart of the therapeutic journey. And, indeed, affectionate and supportive family members, teachers and friends can help children and adolescents to cope with both the adjustments which usual life-stage changes may present, and more serious mental health challenges, and prevent them from re-occurring. The Nurturing Care Framework describes how child-centred laws, policies and services can create an enabling environment in which families, school, and communities can protect children from harm, nurture them physically and emotionally, and ensure that they have opportunities to expand their mental health in creative ways and realise their own unique potential.

A key thing to remember is that most children and adolescents go through life well despite what at times may seem like very difficult challenges. Most children will have episodes of anxiety and worry at some point in their life. Babies cry, and some babies cry considerably more than others. There are very few toddlers that do not test the patience of their parents. Some adolescents seem rebellious



during their exploration of society, and a desire for privacy can feel like they are turning away from their family. Many of these behaviours are characteristic of life and developmental stages, and most children will move on through to new stages in their journey through life. The vast majority will regain their equilibrium, and only very few will develop a serious mental disorders or mental illness. That these experiences may seem transient, does not mean they should be ignored. Rather we need to remember that the first port of call for children and adolescents is their family and caregivers, and both children and parents need to feel supported, reassured when they worry, and offered assistance when they think an issue might be becoming a sign of something more serious.

The consequences of mental ill health, even in the short-term, are deeply injurious – to the individual child and adolescent, their families, and their society. Learning may stop and sometimes even regress, interrupting their cognitive, emotional and social functioning. For example, children

may disconnect from family relations and their behaviour and performance at school may start to deteriorate. If these losses are not remediated by early identification and efforts to address their causes, they can become heavy weights for a child to bear and may drag them down for the rest of their lives, with adverse consequences for them and our society.

In a country beset by poverty, inequality, social exclusion and violence, our most important responsibility is to our children and adolescents. We need to identify those who face difficulties early on and try to rectify or ameliorate these problems so that children can continue their life-long journey with strength and resources. It is therefore essential that our laws and policies, our services for children and families, our leaders and their decisions, and our everyday interactions with one another help to foster, create and maintain conditions that enable all children to be part of powerful loving relationships that comfort them in times of adversity, celebrate their strengths and encourage them to thrive.