RIFE SUBSTANCE ABUSE FEEDING MENTAL HEALTH DISORDERS

Lead investigator in the South African Mental Health Survey, Professor Dan Stein, Head of Psychiatry at the University of Cape Town.

Picture: Chris Bateman

The first-ever mental health survey of South Africans has exposed a particularly high lifetime prevalence of substance abuse disorders compared with other countries, with nearly a third of respondents suffering some kind of psychiatric disorder. Worryingly, substance abuse disorders had a relatively early age of onset (21 years), while three-quarters of respondents with any diagnosed disorder failed to receive help in the year of interview.

> **The estimated prevalence of substance abuse (5.8%) was 'at least' twice as high as that in 25 other WMHI survey countries, with the exception of the Ukraine (6.43%).**

Local surveyors collaborated with the World Health Organization's (WHO's) World Mental Health Institute (WMHI) in an international study between January 2002 and June 2004 – before abuse of the drug *tik* took off like wildfire in the Cape Peninsula. The estimated prevalence of substance abuse (5.8%) was 'at least' twice as high as that in 25 other WMHI survey countries, with the exception of the Ukraine (6.43%).

The researchers said the unique local results provide 'an important target for the planning of mental health services', described as 'severely under funded'.

A lead investigator, Professor Dan Stein, Chief of Psychiatry at the University of Cape Town and chief psychiatrist of the Western Cape Province, said that mental health was the least well funded of all research in this country. 'You lose money by not treating people,' he added, expressing 'regret' that Professor Anthony Mbewu, CEO of the Medical Research Council (MRC), was unable to attend the day's sessions (the results were released at the MRC on 10 October).

Mbewu opened the South African Stress and Health Conference (revolving around the survey results) before offering his apologies, saying it was 'more than my job's worth' to miss supervising a tour of the MRC premises by the national parliamentary portfolio committee on health.

Mental health field 'ripe' for more research

Experts with Stein emphasised that the mental health field in South Africa was 'wide open' and pregnant with potential for enterprising researchers, given that some basic epidemiological work had now been done.

The interview tools used in the groundbreaking survey were the WHO's Composite International Diagnostic Interview (CIDI) and the *DSM IV* classification, generating diagnoses in a demographically representative sample of 4 351 adult South Africans.

A team led by Professor Soraya Seedat of Stellenbosch University's Department of Psychiatry found a 12-month prevalence of moderately severe disorders among 31.1% of respondents nationally, with 26.2% of people classified as severe and 16.5% displaying any of the *DSM IV* disorders over the previous year.

South African prevalence estimates were most comparable with those found in Lebanon and Columbia, in spite of several disorders included in surveys in those countries not being included here in an attempt to shorten interviews (to about 3.5 hours).

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Psychiatric disorders locally were found to be much higher than in Nigeria, the only other sub-Saharan country assessed internationally, while there was a high level of unmet needs among South Africans with severe and moderately severe disorders.

All respondents were asked if they saw an extensive list of treatment providers, including traditional healers and western medicine professionals 'for problems with their emotions, nerves, mental health or use of alcohol or drugs', in the past 12 months.

The researchers made no conclusive findings about why South Africans seemed to be at such high risk, but speculated that the racialised social policies of Apartheid and ensuing political violence and victimisation, plus their legacies of violence and crime, had contributed.

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Mental health researcher, Professor Soraya Seedat of Stellenbosch University's Department of Psychiatry.

Picture: Chris Bateman

Other factors associated with the especially high prevalence of emotional distress included the pervasiveness of harsh economic circumstances, the high risk of HIV/AIDS and the 'unpredictable' threat of trauma and life-threatening injuries from deep surface mining among miners and their families. The most prevalent 12-month *DSM IV*/CIDI disorders were major depressive disorder, agoraphobia and alcohol abuse.

The highest percentage of serious classifications were associated with alcohol dependence (94.8%), drug dependence (81.8%), panic disorder (65.7%), and social phobia (42.7%).

Income, education 'unrelated' to mental health

The survey team found that income and education were generally unrelated to the severity and risk of a disorder. The only exception to this pattern was that having primary education was associated with a two-fold increased relative odds of mood disorder, compared with those with the highest level of education.

The survey revealed that only 7.2% of severe-moderate cases and only 4% of mild cases received treatment in the mental health sector. South Africa has only 1 psychiatrist, 8 psychiatric nurses, 4 psychologists and 20 social workers per 100 000 population (WHO 2005). All are disproportionately located in urban areas. No urban versus rural variations in mental health risk were found.

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Stein told reporters at a special briefing that addressing the paucity of mental health knowledge among primary health care workers was an urgent priority and training systems along the lines of those in the Western Cape needed implementation elsewhere. The expansion of mental health services countrywide was urgent.

Some of the more fascinating findings included significant associations between being white and having intermittent explosive disorder and

between being coloured and substance abuse disorder. Substance abuse disorders were significantly associated with men, while mood and anxiety disorders were more prevalent among women.

There was also an association between being divorced/separated/widowed and having any of the survey-listed disorders.

Possible hypochondria?

A full 14% of South African adults who did not meet the criteria for any of the disorders reported receiving treatment – the highest among any of the surveyed countries.

The lead researcher, Dr David Williams, Professor of Public Health at Harvard University, presented a global overview of the mental health study (conducted in 25 countries among 200 000 adults). He said the 'commonality' of disorders suggested by the data should encourage all reluctant individuals to seek help.

Stein told reporters that one of the great benefits of defining substance abuse as a medical disorder was its destigmatisation, thus enabling treatment by a general practitioner and/or referral onwards. He is on record as saying 'most South Africans would rather die than admit to suffering from a mental illness', while few knew 'about things like an addiction psychiatrist'. A major barrier to destigmatisation was poor mental health literacy among the public, policy makers and clinicians.

Referring to the conference debate on the *tik* drug phenomenon (it post dated the mental health survey), Stein said a few doses of this drug cocktail were enough 'to significantly fry your brain', and 'immediately change' the chemical reward structure.

The next 'fix' then became a greater priority than children, family or any other healthy nurturing social structure.

Chris Bateman

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