No.0103 - 2023: Fifth Session, Sixth Legislature

**GAUTENG PROVINCIAL LEGISLATURE**

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**ANNOUNCEMENTS,**

**TABLINGS AND**

**COMMITTEE REPORTS**

**========================**

Monday, 06 March 2023

**ANNOUNCEMENTS**

none

**TABLINGS**

none

**COMMITTEE REPORTS**

**1. The Chairperson of the Social Development Portfolio Committee, Dr. N E Mokgethi hereby tables the Portfolio Committee’s Report on the International Conference on Child and Adolescent Mental Health held in Dubai, United Arab Emirates (UAE) 2022, as attached:**

**PORTFOLIO COMMITTEE ON**

**SOCIAL DEVELOPMENT**

**INTERNATIONAL CONFERENCE REPORT ON CHILD AND ADOLESCENT MENTAL HEALTH IN DUBAI, UAE 2022**

**ACRONYMS**

|  |  |
| --- | --- |
| IACAPAP | International Association for Child and Adolescent Psychiatry and Allied Professions |
| UAE | United Arab Emirates |
| RSA | Republic of South Africa |
| ASCAPAP | Asian Society for Child and Adolescent Psychiatry and Allied Professions |
| CAMH | Child and Adolescent Mental Health |
| PTSD | Post-Traumatic Stress Disorder |
| LMICs | Low-Income and Middle-Income Countries |
| COVID-19 | Coronavirus Disease of 2019 |
| GPL | Gauteng Provincial Legislature |
| UCT | University of Cape Town |
| ILA | International Leadership Association |
| HIV | Human Immunodeficiency Virus |
| UNICEF | United Nations International Children’s Emergency Fund |

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**Social Development Portfolio Committee**

**07 March 2023,**

The Hon. Chairperson of the Portfolio Committee on Social Development Dr. Nomathemba Mokgethi hereby tables the Portfolio Committee’s Report on the International Association for Child and Adolescent Psychiatry and Allied Professions’ (IACAPAP) held in Dubai, United Arab Emirates (UAE) as follows:

**1. Background and Introduction**

Being mentally healthy during childhood means reaching developmental and emotional milestones and learning healthy social skills and how to cope when there are problems. Mentally healthy children have a positive quality of life and can function well at home, in school, and in their communities. Mental disorders among children are described as serious changes in the way children typically learn, behave, or handle their emotions, which cause distress and problems getting through the day.

Many children occasionally experience fears and worries or display disruptive behaviours. If symptoms are serious and persistent and interfere with school, home, or play activities, the child may be diagnosed with a mental disorder. Mental health is not simply the absence of a mental disorder.

Children who don’t have a mental disorder might differ in how well they are doing, and children who have the same diagnosed mental disorder might differ in their strengths and weaknesses in how they are developing and coping, and in their quality of life. Mental health as a continuum and the identification of specific mental disorders are both ways to understand how well children are doing.

The International Association for Child and Adolescent Psychiatry and Allied Professions’ (IACAPAP) organisation organises conferences annually to gather international experts in the field of child mental health in order to come up with solutions to this international problem. This year the conference was held in Dubai, United Arab Emirates (UAE). The mission of IACAPAP is to advocate for the promotion of the mental health and development of children and adolescents through policy, practice, and research.

**2. Purpose of the Conference**

The Purpose of the Conference was to:-

* support organisations devoted to promoting the mental health of children and adolescents;
* disseminate information and foster training through multidisciplinary study groups, detailed presentations and other educational initiatives; and
* strengthen the bonds between the different regions of the world to promote multi-disciplinary, multi-professional research and clinical practice in *child and adolescent mental health* (CAMH).
* promote international, state and community policies within all sectors of human services to ensure evidence-based, culturally acceptable, affordable and accessible mental health services are available for all children and adolescents.

**3. Envisaged Objectives**

The research in South Africa shows that Child Mental Health is a subject that is not particularly given much attention in South Africa compared to the more developed countries. Although South Africa is making more progress compared to other African countries, it is significantly lagging internationally.

As the custodian of child welfare and protection, the Gauteng Provincial Legislature’s Portfolio Committee on Social Development has taken a keen interest in this toping with the view of improving child mental care services in the province. The main objectives for attending this Conference were to:

* Learn international best practices on issues of Child Mental health
* Identify weaknesses in the South African system with regards to Child Mental health
* Identify the role that the oversight Committee can play in addressing challenges of child mental health taking into account that this discipline cuts across both the Portfolio of Health and Social Development
* Find sustainable ways of liaising with the health sector in addressing, improving and preventing child mental health cases

**4. Analysis of the Findings**

The Conference 5-day Conference had over 20 parallel sessions per day covering various topics, starting from 09:00 to 18:00, and one keynote address attended by every delegate in the plenary. Whilst Hon Members were allowed to choose the toping of their choice, the chosen toping needed to be relevant to the work of the Committee and the South African context.

The Conference delved deeper into the issues of preventative, care and recovery mechanisms for children leaving with mental disorders. In terms of preventative care, it explored the need for healthy, balanced screen exposure diet. healthy use of technology. The key is understanding the harmful effects that screens can have on our children and balance it with healthy exposure and limits.

Children have strong attachment to media devices that can potentially cause them to go without food or drink for long periods of time. There needs to be parent involvement with child screen exposure by amongst others, setting screen involvement limits, ensuring the child is exposed to beneficial content and reporting illegal content.

Another mechanism of prevention is ensuring the involvement of father figures in early childhood development. Scholars concluded that boys and girls who grow up with an involved father, as well as an involved mother, have stronger cognitive and motor skills, enjoy elevated levels of physical and mental health, become better problem-solvers, and are more confident, curious, and empathetic.

All children may experience very stressful events that affect how they think and feel. Most of the time, children recover quickly and well. However, sometimes children who experience severe stress, such as from an injury, from the death or threatened death of a close family member or friend, or from violence, will be affected long-term. The child could experience this trauma directly or could witness it happening to someone else.

When children develop long term symptoms (longer than one month) from such stress, which are upsetting or interfere with their relationships and activities, they may be diagnosed with post-traumatic stress disorder (PTSD). Children like adults, experience mental health problems. International according to the World health organization, 50% of mental health problems are established by age 14 and 75% by age 24. 10% of children and young people (aged 5-16 years) have a clinically diagnosable mental problem, yet 70% of children and adolescents who experience mental health problems have not had appropriate interventions at a sufficiently early age.

In the Republic of South Africa (RSA), it is estimated that more than 13 per cent of adolescents aged 10–19 live with a diagnosed mental disorder. This represents 86 million adolescents aged 15–19 and 80 million adolescents aged 10–14. Anxiety and depression make up about 40 per cent of these diagnosed mental disorders; the others include attention deficit/hyperactivity disorder, conduct disorder, intellectual disability, bipolar disorder, eating disorders, autism, schizophrenia, and a group of personality disorders.

In addition, almost 46,000 adolescents die from suicide each year, among the top five causes of death for their age group. This is partly due to the fact that Child and adolescent psychiatrists and other mental health professionals are available in only a handful of urban centers, while limited services and human resources compromise care at district level.

South Africa has fewer than 60 child and adolescent psychiatry specialists, but this is still more than any other country in sub-Saharan Africa. Of these specialists, 20 practice in the public sector, while there are only five funded training posts nationally. Government-funded specialist services for children and adolescent mental health are available in Cape Town, Johannesburg, eThekwini, and Tshwane.

Pointing out the essential role of primary health care clinics and district hospitals, Simphiwe Simelane, of the Centre for Autism Research at the University of Cape Town (UCT), states that these medical institutions should be able to identify and care for children close to home while being supervised by child and adolescent mental health specialists caring for children with more complex conditions at secondary and tertiary hospitals.

The conference focused on the need for using social media for educating and advocating for child and adolescent mental health. We live in a digital age where information can be found instantaneously via the Internet. Studies have shown that consumers search for much of their medical information on the Internet, particularly utilizing blogs and social media platforms.

As the mental health field is riddled with misinformation and stigma, this offers a unique opportunity for psychiatrists and mental health professionals to reach a broad audience for mental health education and advocacy. Stigma among children youth is a major problem that could potentially perpetuate mental health problems. Mental health stigma is a major barrier to seeking help and leads to poor quality of life and social withdrawal for children living with mental illness.

These concerns are especially severe in low-income and middle-income countries (LMICs) that face a disproportionate share of the global burden of mental illnesses. With growing access to digital technologies in LMICs, there may be new opportunities to address mental health stigma. These three categories align with established stigma reduction programs. Digital strategies could expand the reach of or complement existing efforts.

There are challenges with digital stigma reduction strategies, including the need for cultural adaptation of these programs to diverse contexts and settings, consideration of reliable measurement of mental health related stigma, and risks that digital media could perpetuate the spread of misinformation and exacerbate concerns pertaining to mental health stigma.

Mental health problems in childhood and adolescence pose a major threat to public health. Epidemiological studies in high-, middle- and low-income countries indicate that approximately one in five children and adolescents suffer from a mental disorder. In many instances these persist into adulthood. In the Republic of South Africa, Human Immunodeficiency Virus (HIV) infection, substance use, and exposure to violence increase vulnerability to mental disorders. Child and adolescent mental health services play a key role in reducing the burden of mental disorders in childhood and later in adulthood.

The Coronavirus Disease of 2019 (COVID-19) further has put the mental health and well-being of an entire generation at even greater risk. The disruption to their routines, education, recreation, as well as concern for family income and health, is leaving many young people feeling afraid, angry and anxious for their future. Investing in child and adolescent mental health services and systems now will provide the early interventions needed to prevent long-term, multi-level costs associated with poorly functioning services.

Building children’s confidence and capacity to take initiative, cope with adversity and contribute to community life are critical ingredients of mental health and active citizenship. We need to work in partnership with young people and harness their energy, creativity, and clarity of thought to design policies, services and programmes that are responsive to their needs and prepare them for the challenges to come.

**5.** **Lessons Learned from the Conference**

The Committee has learnt and will inculcate the following lessons to its future strategic plans.

* Although children mental health needs attention in South Africa, strides have been made to improve but more is needed
* There’s a need to work with the Portfolio Committee on Health to advocate and allocate more resources towards enhancing child and adolescence mental health in the Gauteng Province
* There’s a need to create awareness campaigns on the strategies of improving child and adolescent mental health
* Education campaigns especially at school must be increased in an attempt to reduce stigma around child and adolescent mental issues
* Good mental health helps children develop socially, emotionally, mentally, and physically.
* Loving relationships are key to children’s mental health.
* Learning to manage feelings is important to mental health.
* Physical activity, healthy eating habits and quality sleep are good for children’s mental health.
* The Committee should work closely with the Portfolio of Sports, Arts, Culture and Recreation, Education as well as Health in order to find sustainable ways of comprehensively dealing with child and adolescent mental issues in the Gauteng Province.

**6. Conclusion**

All experts in the field of child protection, agree that it is essential to place children at the centre of all policies and to create an enabling environment that will protect children from harm, build their capacity to cope with stress and adversity, and provide them with opportunities to thrive. Prevention of mental health problems is after all more cost-effective and leads to better health and wellbeing outcomes than treatment alone.

Every single child in Republic of South Africa (RSA) needs support so that they can develop the strength and resources to meet life’s challenges. And the ordinary support of parents, teachers and communities can help build resilience and set children on a positive trajectory.

The United Nations International Children’s Emergency Fund (UNICEF) has called for commitment, communication and action to promote good mental health for every child, protect vulnerable children and care for children facing the greatest challenges, highlighting the importance of child and adolescent mental health.

**7. Recommendation and Way Forward**

The Portfolio Committee on Social Development has a constitutional obligation according to Section 114 (2), to provide mechanisms to exercise oversight over the Provincial Executive. Through its oversight activities, the Committee advises the portfolio Department by making House Resolutions on key policy related issues to enhance service delivery.

In light of the above, it is recommended that the delegation attends as per invitation the 11th World Congress of the Asian Society for Child and Adolescent Psychiatry and Allied Professions (ASCAPAP) 2023 in Kyoto, Japan scheduled to take place on 26 – 28 May 2023 as well as the World Congress of International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) 2024 to further explore and engage on Child Development Mental Health Challenges and the future of Nations scheduled to take place in Rio de Janeiro, Brazil on 20 – 24 May 2024.

The Committee further recommends that the Department of Social Development should draw its attention to lessons learned from the World Congress of International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) that was undertaken to Dubai, United Arab Emirates (UAE) from 05 – 09 December 2022 with the theme, Child and Adolescent Mental Health: Shaping the Future, when dealing with Child and Adolescent Mental Health in Gauteng.

**8. ACKNOWLEDGEMENTS**

I would like to express my appreciation to the Leadership of Speaker, Hon Ntombi Mekgwe and the Chairperson of Committee’s, Hon Sizakele Nkosi-Malobane.

My appreciation for diligence, dedication and commitment goes to Members of the Committee: Hon T. Magagula, R. Ntse’khe, R. Kekana, B. Engelbrecht, B. Badenhorst, M. Mofama and D. Ledwaba for their dedication and representing the Committee very well during the conference proceedings.

The Committee would also like to thank following officials for their support, Mr S. Nqwala, Ms Z. Pantshwa-Mbalo, Ms Z. Abraham, Mr H Ngobeni, Ms N Hogan-Msimang, Ms T Khoza, Ms N Godongwane , Mr S Mhlambi and Mr S. Buthelezi for their dedication in assisting the Committee and ensuring that the International Conference becomes a success.

**9. Adoption of the Report**

In accordance with Rule 117 (2) (c) read together with Rule 164 of the Standing Rules of the Gauteng Provincial Legislature, the Portfolio Committee on Social Development recommends that the report on the 25th World Congress of International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP), in Dubai, United Arab Emirates (UAE) from 05 – 09 December 2022 with the theme, Child and Adolescent Mental Health: Shaping the Future, be adopted by the House, taking into account the Committee proposed recommendations made in this report.