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New research explores validity of task-shifting mental health care in SA



Nqabisa Faku.

Photo: Supplied

When Nqabisa Faku graduates with her master's in psychology from the University of Cape Town (UCT) today, the moment will be bittersweet. UCT's Sarah Baartman Hall will be packed with proud loved ones – cheering and ululating as their graduands take to the stage. But for Nqabisa, things will be different. The moment will be a poignant one.

Nqabisa's mother succumbed to COVID-19 soon after she started her master's in 2020. The harsh reality of death knocked the wind out of Nqabisa's sails. Her anchor and the one she depended on most in the world was gone forever. How would she carry on? Despite her immense grief, she made a decision to press on with her degree and to make both her parents and younger sister proud.

While growing up, Nqabisa's parents raised her to believe in the power of prayer. And even though her mother was no longer around to give her a reassuring hug and to tell her that everything would be okay, Nqabisa still had her dad's and sister's love. And she kept going. In time she found purpose – in prayer, in family, in members in the UCT community and in her research.

"After my mom passed away, I needed time to process my grief with my family and learn to be everything my mother was to me. Also, I returned to praying, which gave me strength to pick myself up and to keep going because she'd want that," Nqabisa said. "This helped me gain a new perspective on death and helped me to understand the circle of life so much better so that I could turn my grief into gratitude. It was exactly what I needed to revive my spirits and to keep going with my master's journey."

Because mental health disorders among adolescents and young adults remain a monumental challenge globally, Nqabisa's research is guided by her desire to help adolescents and young adults with mental health challenges lead happy and healthy lives. The World Health Organization reports that suicide is the third leading cause of death among adolescents worldwide. And according to the Disability-Adjusted Life-Year metric – a measurement of the overall disease burden expressed by the number of years lost due to ill health, disability or death – depression is the fourth leading cause of ill health and disability among adolescents globally; followed by mental illness and anxiety, which rank in sixth and ninth place respectively.

Yet, despite these startling statistics, access to effective mental health care and support for young South Africans, especially those living in under-resourced communities, is an enormous challenge. And South Africa also lacks trained mental health practitioners to provide this much-needed service.

Therefore, Nqabisa's research suggests that the national Department of Health provide alternative age-appropriate mental health services to adolescents in the country – to promote equity within the mental health care system and to bridge the treatment gap. To get this right, she recommends that the department explores the feasibility of task-shifting mental health care to lay counsellors and equipping them with the skills they need to integrate into the primary and mental health care sectors.

Task-shifting mental health care requires that trained mental health practitioners like social workers and psychologists upskill and supervise non-specialist mental healthcare providers to deliver an effective counselling service. Adopting this initiative will increase the pool of overall healthcare providers in the overburdened public healthcare setting.

"Task-shifting is a viable solution to addressing the current shortage of mental health practitioners in South Africa because it easily increases the pool of practitioners by way of training and supervising. And in this way, those out there who are in dire need of mental health treatment can get the support they need," Nqabisa said.

Nqabisa has always been in support of task-shifting mental health care. And as she immersed herself in her research, she realised that much of the existing literature focused on the effectiveness of training and supervising counsellors to treat patients with common mental health disorders. But very little research, she added, focused on those who deliver and receive the service, as well as those who train and supervise the team of counsellors, to establish their experiences first-hand. This presented a perfect opportunity for her master's dissertation.

Nqabisa's research explored the views and experiences of a group of registered counsellors, their supervisor, and several adolescent participants who form part of Project ASPIRE. The project is a task-shifting mental health intervention carried out as a randomised control trial (RCT) in partnership with UCT and the South African Medical Research Council.

Approximately 100 adolescents between the ages of 15 and 18 from underprivileged communities in Cape Town, who presented with severe depression and alcohol and substance abuse tendencies, participated in the RCT. Three trained and supervised registered counsellors delivered one-on-one motivational interviews and problem-solving counselling sessions over a six-week period in community-based settings to help adolescents develop healthy coping mechanisms to facilitate their recovery.

After interviewing a group of Project ASPIRE respondents, Nqabisa's research found that patients in the project benefited from the motivational interviews and the problem-solving techniques they acquired during counselling sessions. The counselling space also created a positive environment, developed adolescents' autonomy and encouraged self-efficacy.

Adolescents also reported that they felt comfortable and were committed to attending regular sessions with their counsellor. Further, the supervisor indicated that regular, rigorous monitoring and evaluation assessments benefited counsellors and ensured that they remained dedicated to the cause. In addition, weekly peer group sessions were also considered constructive because it allowed counsellors to collaboratively address and solve challenges, learn from each other's strengths and weaknesses and to receive feedback positively to encourage accountability.

Finally, Nqabisa said the group of counsellors interviewed for her research paper highlighted the value of this intervention. They noted that upholding diversity, equity, and inclusive values like acceptance and respect for the adolescent's cultural context, which the project held in high regard, helped them to exercise their flexibility, and when necessary to refer patients to counsellors who spoke the same first language.

"Our national health department needs to place a much bigger focus on reimagining ways of improving access to adolescent mental health care. And appointing lay and registered counsellors to deliver this service in the primary and mental health care [sector] is part of the answer. Project ASPIRE is an example of a mental health task-shifting intervention that raises awareness on the conditions to improve mental health services for adolescents. These include moving mental health services beyond primary healthcare facilities to community-based settings and allocating an adequate budget to address their mental health needs," Ngabisa said.

Nqabisa said she is grateful to finally be at the end of her master's journey. She is proud that her research has proven that adopting the task-shifting mental health intervention is the key to addressing the mental health treatment gap, promoting health equity within the healthcare system and changing many lives for the better.

Story by Niémah Davids, UCT News.

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