Psychiatry & Mental Health in Africa and the time of COVID-19

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Plan

- Observations about COVID-19
- Psychiatry and Mental Health in Africa and the impact of COVID-19
- Some actions and positives
5 Specific observations
#1. COVID-19 is everywhere

- All regions, all countries
- Variable severity
- Adults > children
- Confusion about language e.g. symptoms versus confirmed/screening versus testing
- This has led to lots of uncertainty
COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at JHU

Total Confirmed: 4,281,838

Confirmed Cases by Country/Region/Sovereignty:
- 1,370,016 US
- 242,271 Russia
- 228,030 Spain
- 227,741 United Kingdom
- 221,216 Italy

Global Deaths: 292,376
- 82,389 deaths US
- 32,769 deaths United Kingdom
- 30,911 deaths Italy
- 24,994 deaths

Lead by JHU CSSE. Automation Support: Esri Living Atlas team and JHU
But in Africa there are also many other communicable diseases

**HIV/AIDS**
- 25.5 million Africans HIV +ve
- >1 million/year death rate
- 70% of global cases

**Tuberculosis**
- 2.5 million Africans in 2016
- ~417,000/year death rate
- 25% of global cases

**Malaria**
- 200 million Africans in 2017
- ~400,000/year death rate
- 92% of global cases
#2. Fake news and the INFOdemic

- Causes
- Treatments
- High volume of information
- Changing information
Use of Commercial Disinfectants to Treat Novel Coronavirus (Covid-19) through Oral Administration or Subdermal Injection

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BACKGROUND

On March 23rd, 2020, President Donald J. Trump, during his daily briefings on the response to Covid-19, suggested the use of disinfectants to treat patients infected with the novel coronavirus Covid-19. We conducted a study on the efficacy of using commercial disinfectants through oral administration or subdermal injection.

METHOD

We read the labels on the bottles we found in the janitors closet.

CONCLUSION

This will kill you. Don’t do it.
#3. National responses vary

- Screening
- Testing
- Lockdown
- Variable information systems
- Variable expertise
- Weaknesses in health/other systems
South Africa
57.7 million

Nigeria
206.1 million

Tanzania
59.7 million

Data from Johns Hopkins
Wednesday, 13 May 2020
#4. Technology for everyone

- Connecting to people
- Connecting to information
- Tracing contacts
- Education
- Digital divide
Internet Users as proportion of Country Population
#5. Burden on families

- Selfcare
- Care of children and other dependents
- Economic
- Emotional
The art of medicine
Has COVID-19 subverted global health?

For the first time in the post-war history of epidemics, there is a reversal of which countries are most heavily affected by a disease pandemic. By early May, 2020, more than 90% of all reported deaths from coronavirus disease 2019 (COVID-19) have been in the world’s richest countries; if China, Brazil, and Iran are included in this group, then that number rises to 96%. The rest of the world—historically far more used to being depicted as the reservoir of pestilence and disease that wealthy countries sought to protect themselves from, and the recipient of generous amounts of advice and modest amounts of aid from rich governments and foundations—have meanwhile been left to die in the millions of other diseases, and lockdowns have made accessing essential health care much more difficult in some places. In India, for example, public transport, the main way for the poor and many health-care workers to reach a health facility, has been barred since late March, although a limited restoration was announced on May 4, 2020. Not surprisingly, there have been dramatic reductions in essential public health and clinical interventions; data from India’s National Health Mission indicate that there was a 69% reduction in measles, mumps, and rubella vaccination in children, a 21% reduction in institutional deliveries, and...
Image courtesy of Dr Liezl Schlebusch, University of Cape Town
So, what do we see in Psychiatry and Mental Health Services?

• **Clinical services**
  - Rapid de-escalation of clinical care
  - Only emergencies
  - Telephone consultations for existing patients
  - Challenges in accessing medications (patients and countries)
  - Reduced support to and from non-profit sector
  - Significant financial stress
  - Food poverty
• Teaching/training
  Online training
  Limitations of technology
  Reduction in range of cases for training
  Challenges to meet other training requirements
  Delays in examinations
• Research
All clinical research had to stop
Additional ethical motivation required to continue
Deprioritisation of research against clinical/teaching
Ethical impact on families/communities
Other themes

• Coming to hospital will increase chance of getting COVID-19
• Stigmatization of health workers as reservoir for COVID-19
• Lockdown preventing many from going out/exercising/accessing care/work/food
Concerns for Africa

• That the health and economic disparities in Africa will simply be exacerbated by the COVID-19 pandemic
• That the health and economic consequences of lockdown will be worse than those of COVID-19
• That public health interpretations will be made about COVID-19 in Africa without considering the significant barriers to testing
Positive actions from COVID-19

• Rapid take-up of remote learning, teaching, coaching
• Increased motivation to use technology (from families and professionals)
• Global willingness to support access to data, devices, free courses, materials, resources...
Positive actions from COVID-19

- [www.psychiatry.uct.ac.za](http://www.psychiatry.uct.ac.za) [COVID-19 resources]
- *Autism Research* [global reflections]
- Tips for Parents [in 7 languages]
- Advocacy with autism NPOs in Africa
Autism Symposium 2020

25-27 June 2020

The Institute of Psychology & Wellbeing (North-West University) in partnership with Autism South Africa and the South African Association for Child and Adolescent Psychiatry and Allied Professions will be hosting the 5th National Autism & SA-ACAPAP Symposium on the 25th - 27th June 2020.

Due to the COVID-19 pandemic and regulations put in place as a result of it, this year's symposium will be held online.

The symposium is a blend of insights from individuals and families challenged with Autism or mental health issues as well as research and knowledge shared by professionals.

The theme for this year is Step Ahead on Emotional Regulation.
social relief of distress

As a result of the lockdown, a number of people are facing a loss of income, or the loss of the ability to generate income. SASSA continues to provide hope to thousands of people, through the social relief of distress. SASSA will have staff manning all district offices in every province as from Monday, 06 April 2020. These staff will deal with telephonic applications for SRD and activate local teams which are on standby.

Regional contacts

for Social Relief of Distress (SRD) Applications

Applications could be made by either calling:
SASSA National Call Center: 0800 60 10 11 or
Email to: grantenquiries@sassa.gov.za.

SASSA also has contact staff in every province, to try and relieve the congestion at the national call centre. Callers are requested to have their ID Numbers ready.

The contact numbers are as follows:

*Eastern Cape: 043 707 6300 or 043 707 9335 (office hours only)
*Free State: 051 410 6339
*Gauteng: 011 241 6320
*KwaZulu-Natal: WhatsApp 071 607 1514 (Send a message) or phone 033 846 3300
*Limpopo: 015 291 7509
*Mpumalanga: 013 754 9428 / 9454
*Northern Cape: 053 802 4900
*North West: 018 397 3360
*Western Cape: 021 493-0235 (leave a message and staff will get back to you)

*The contact numbers are not toll-free
THANK YOU!