



University of Fort Hare
Together in Excellence

RESPONSE SUBMISSION ON NHI BILL – DEPARTMENT OF PSYCHOLOGY (UNIVERSITY OF FOR HARE)

Presenter: Mrs Lucille Hendricks

Background

- As Counselling Psychologists, Psychology Department and as University we hope to act as valuable partners in achieving the objectives of the NHI Bill
- The University of Fort Hare has offered the degree of Counselling Psychology since the year 2000, (Rhodes university branch to the Fort Hare East London Campus branch)
- Community Psychology has always played an important part in the curriculum of the Department.



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- Currently on our staff:
 - Two (2) Clinical Psychologists and Six (6) Counselling psychologists and three (3) research Psychologists.
 - HPCSA accredited Internship Program: Masters in Counselling Psychology
 - Internship sites (communities of practice):
 - Psychological Services Centre,
 - Student Counselling Unit, (UFH)
 - Both have full time Counselling Psychologists who also act as supervisors of our intern psychologists as well as our student psychologists.
 - We also have several community engagement sites of practice that fall part of our community outreach projects that involved the broader Buffalo City Municipality and outskirts and the Alice community.
 - Sites include: Schools, Children's Homes, Churches and NPO's
 - These sites include the diverse demographic groups and socio-economic statuses that represent the diversity of South Africa.



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- Strong Community Psychology ethos and program
 - Our intent is to:
 - Train students to work within communities where the contextual issues are the focus and understood psychologically, within the context of community.
 - To redress the inequalities of the past, by servicing vulnerable groups (historically would not have access to psychological services)
 - Preventative strategies, containment, appropriate referral and networking, advocating, and facilitation psychosocial needs
 - Hospitals and Clinics are dealing with an overwhelming number of trauma and illness.
 - Many of the cases that end up in these health care centres, could have been prevented and dealt with at an early stage, through preventative psychosocial interventions.



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- Issue of interventions from **Macro (community)** to **micro (individual)** levels have been raised for many years.
 - 1940 Sidney and Emily Kark set up a health centre at Pholela according to the principle of **Community Oriented Primary Care (COPC)** that eventually gained **international recognition** and laid the foundation for much of the **primary health care** that we are still following at present in South Africa.
 - In the early 70's, Erika Theron Report discussed the pervasiveness of cognitions and discourses that contributed to the establishing of narratives of chronic poverty in the communities of the Western Cape.

In a society where trauma, suicide, violence, depression, sexual abuse, substance abuse, and unemployment and poverty has become a norm, it is imperative that one recognizes the value and contribution of **preventative** work, in particular the role and effectiveness of Psychologists and Counselling Psychologists in particular.

Community-based mental health services are highly desirable.

Ideally, mental-health professionals should be available to citizens, as specialist services to which a Primary healthcare team can refer.

This is not addressed in the NHI Benefits.

In Response to the Bill

- General Mental Health needs to be integrated more effectively into the National Health Insurance Bill
- Assurance equitable access to health services for all people needs to be prioritized
- Mental health expertise need to be included in the advisory structures of the National Health Insurance Bill
- The area of preventative work needs to receive appropriate funding, and support (the ramifications of these psychological stressors and events negatively impact on the families, communities and greater society).

- The Role that **Counselling Psychology** plays, needs to be **recognised and prioritized** in the NHI Bill especially as:
 - A major role player for the future of achieving the mental well-being of individuals, families, and communities in South Africa.
 - Playing a part in the achievement of equitable National and Local Health and Mental Health outcomes, especially in areas of the healthcare facilities (hospitals and clinics), schools, and community centres, to name a few.

Scope of Counseling Psychologists

Is to:

“Assessing, diagnosing, and intervening in clients dealing with life challenges, and developmental problems to optimise psychological wellbeing;

A. Assessing cognitive, personality, emotional and neuropsychological functions in relation to life challenges and developmental problems; assessing developmental processes (e.g. career choice), and adjustment;

B. Identifying psychopathology, and its impact on developmental processes, and adjustment; identifying, and diagnosing disorders of adjustments; applying psychological interventions to clients with developmental challenges, and adjustment problems; performing therapeutic counselling interventions; referring clients to appropriate professionals for further assessment or intervention;

C. Advising on the development of policies, based on various aspects of psychological theory and research; designing, managing and evaluating programmes dealing with developmental, and adjustment problems;

D. Training, and supervising other registered counselling psychologists in counselling psychology;

E. Designing, managing, conducting, reporting on, and supervising psychological research; conducting psychological practice, and research in accordance with the Ethical Rules of Conduct for Practitioners registered under the Health Professions Act, 1974; adhering to the scope of practice of counselling psychologists; and

F. Providing expert evidence and / or opinions (HPCSA, 2008).



Specific comments on the Bill

As mental health professionals, we commit in particular to providing **input** relevant to **supporting a health care system**, which will improve access to mental health care in South Africa.

Goal 3 of the 17 universal Sustainable Development Goals (SDGs), in force since January 2016, explicitly notes the centrality of mental health and wellbeing to overall health status of nations. Sub Goal 3.4 states: “By 2030, reduce by one third premature mortality from non-communicable diseases through **prevention and treatment and promote mental health and well-being**”. Sub Goal 3.5 states: “Strengthen the **prevention and treatment** of substance abuse, including narcotic drug abuse and harmful use of alcohol”.

Goal 3 is also acknowledged to underpin all other goals. The priority groups identified for special focus by the SDGs are women, children, the aged, poor people, and people with disabilities (which includes people with intellectual and psychosocial disabilities).

In order to achieve Goal 3 above,

Counselling psychologists already assess, diagnose and intervene with people in dealing with life challenges and developmental problems to optimise psychological well-being.

However, there is a gap between the vision and the practical implementation of above objectives.

In order to achieve these objectives we propose that the NHI budget funding should reflect this goal. We propose that **a third (30%) of the NHI funding** should be set aside for **professional preventative interventions** in order to achieve the **goal of general mental health** for individuals, families, groups, and communities.

The NHI Fund should offer our country the opportunity **to develop and implement interventions** focused on three mental health related issues.

These are, (1) **the promotion of healthy lifestyles and mental wellbeing**, individually and within communities, and **not only within health facilities**;

(2) We suppose a **more robust embedding of a mental health orientation to physical health promotion and treatment services**;

and (3) **providing adequate mental health services for people with enduring mental illness** (psychosocial disability) within our health system.

Mental wellbeing within communities:

Extensive international and local research indicates that high levels of poverty, trauma and constraints to social and economic development faced by many South Africans disrupts psychological health and negatively affects ones resilience needed to cope with and overcome stressors.

The need to employ psychological interventions and skills to rebuild a healthy, resilient national psyche experienced by citizens is paramount. Equipping communities, families and individuals with appropriate conflict resolution, self management, adequate coping and problem solving skills could greatly assist our citizens, as preventative strategies.

The rise in gender-based violence, family murders, attacks on thriving community businesses and infrastructure, violent neighbourhoods, and the mental strain experienced by South Africans due to recent unemployment and economic impact of Covid-19 are examples of the challenges faced by our citizens. Yet, mental health services are not always available or accessible for individuals, families and communities.



Professional interventions are required in order to deal with these key psychosocial issues.

Funding needs to be made available from the **NHI budget** to appropriately **theoretically trained professionals** who can develop, and roll out and assess appropriate interventions.

The availability of funding for interventions of this nature will **provide the impetus for highly skilled individuals to make their services available** to the communities who need it the most and provide this critical service.

This may also allow the country to **retain highly skilled professionals** for the South African community as they make a valuable contribution to the social context.

Concluding remarks

In a society where trauma, suicide, violence, depression, sexual abuse, substance abuse, and unemployed and poverty has become a norm, it is imperative that one **recognizes the value and contribution of preventative work**, in particular the **role and effectiveness of Counselling Psychologists**.

Counselling Psychologists should be appointed on the **Benefits Advisory Committee and health Diagnostic related groups**.

Recently, South Africa's national lockdown presented serious risks to public mental health in a society where one in three individuals develop a psychiatric disorder during their life. Authors Kim, Nyengarai and Mendenhall (2020), evaluated the Mental Health Impacts of the COVID-19 Pandemic in Urban South Africa, and reported that citizens experienced extremely high "anxiety, financial insecurity, fear of infection, and rumination. Higher perceived risk of COVID-19 infection is associated with greater depressive symptoms among adults with histories of childhood trauma during the first six weeks of quarantine. High rates of severe mental illness and low availability of mental healthcare amidst COVID-19 emphasize the need for immediate and accessible psychological resources in South Africa".

Community-based mental health services are highly desirable and needed.

Ideally, mental-health professionals should be available to citizens, as specialist services to which a Primary healthcare team can refer. **This is not addressed in the NHI Benefits however.**

Furthermore, the lack of attention given to Counselling Psychology in the NHI Bill forces us to question if the Bill is working against making psychological services more relevant to the vast majority of South Africans, and against promoting decolonialisation where its emphasis is on dismantling vestiges of **supremacism?**

In July 2019 a call to provide mental health and forensic services was published by the national directorate for mental health, and called for submissions by **registered counsellors and clinical psychologists only**, thus excluding Counselling Psychologist who work daily in these areas within our communities.

As one of the major role players for achieving the mental well-being of individuals, families and communities, **Counselling Psychology**, deserves to be **recognised and prioritized** in the NHI Bill.





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