## **Empowerment and Collaboration in Mental Health**

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Over the past two decades, I have seen a noticeable transformation in the mental health sector in South Africa in terms of "rescuing" persons with mental health disorders from societal neglect, from where they had no voice, and many were being imprisoned in state psychiatric facilities situated on the outskirts of society. Today, the emphasis deinstitutionalization, participation and inclusion in community life, and accessing mental health care services at district level as set out in our new Mental Health Care Act, which further makes provisions for the protection of the rights of persons with mental health disorders [1].

This transition, I was able to note, in my capacity of being diagnosed with paranoid schizophrenia in 1991 and since 2003 to date where I have become actively involved in the cause of mental health as an activist and in mental health community development. My experience from a mental health care user's perspective, especially during a time where I struggled to overcome the devastating symptoms of schizophrenia, involved numerous admissions to psychiatric hospitals, where the basic human rights of the patients were violated in the form of physical and emotional abuse, to exposure to a non-conducive environment for recovery. I have seen how high levels of stigma and discrimination on a community level further impacted on the quality of life of those living with mental health disorders, and created barriers in accessing life opportunities such as employment and education. Much of the improvement noted, I believe, stems from the empowerment of persons affected by mental health disorders through advocacy where they obtain a platform to express their needs and concerns, and expose human rights violations. Their voice is further strengthened collaboration with mental health care practitioners and researchers who provide evidence-based information to back up the messages they are conveying to society at large, in order to ensure that their basic human rights are respected and protected and that they are given the opportunity to live up to their full potential as human beings.

The wellbeing and quality of life of persons with mental health disorders does not merely rely on the health factor but requires a holistic approach that addresses the challenges in all aspects of their lives.

Dr. Margaret Chan, Director-General of the World Health Organization, said: "Positive mental health is linked to a range of development outcomes, including better health status, higher educational achievement, enhanced productivity and earnings, improved interpersonal relationships, better parenting, closer social connections and improved quality of life. Positive mental health is also fundamental to coping with adversity. On the other hand, poor mental health impedes an individual's capacity to realize their potential, work productively, and make a contribution to their community [2]"

One of the major barriers to making mental health care more accessible and to enable inclusion in society is the marginalization of the voices of people affected by mental health disorders and the limited capacity of groups representing them to articulate their needs.

My journey of hardship led me to become instrumental in the establishment of the Gauteng Consumer Advocacy Movement (GCAM) in 2006, a project of Central Gauteng Mental Health Society (www.cgmhs.co.za), which focuses on the empowerment of persons affected by mental health disorders and exposing human rights violations. Mental health advocacy movements, like GCAM, have become a growing concept globally and have had significant success in improving the lives of persons affected by mental health disorders, through influencing policies and legislation, advancing human rights, and by influencing the way in which society perceive these disabilities and act towards those living with them [3]. GCAM instituted various programs and activities to address key identified areas. Results of an Impact Survey (2011) conducted with 150 GCAM members indicated that, through the programs and activities of the Movement, they have gained insight into their mental illness and understood the importance of treatment compliance, their relationships with family and friends improved, community attitudes towards them improved, their selfesteem and social skills improved, they have become aware of their rights and responsibilities, and they have been empowered to advocate for themselves and others.

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Cite this article: Sunkel C. Empowerment and collaboration in mental health. J Pak Med Stud. 2012; 2(4): 154-155 In 2010, I became involved in the EMPOWER Project of the Movement for Global Mental Health (www.globalmentalhealth.org), as a communications consultant. EMPOWER stands for "Empowering people affected by mental disorders to promote wider engagement with research". EMPOWER is a unique example of a collaboration between mental health researchers and people affected by mental health disorders which has sought to build a shared understanding on mental health care, involving a leading global mental health research institution, the London School of Hygiene and Tropical Medicine, and five NGOs: Sangath (India), the Nepal Mental Health Foundation, the Mental Health Users Network of Zambia, the Users and Survivors of Psychiatry in Kenya, and the Richmond Psychosocial Foundation (India). Products that have been developed include a documentary, theatre play, songs, audio-visual materials, and

It is important to mention that even though improvement has been achieved in some countries on various levels, there are still major challenges facing persons with mental health disorders, mainly in low- and middle-income countries, including South Africa. Mental health is the most neglected sector in health, despite the high prevalence of mental health disorders in all societies, irrespective of race, sex, age, culture or financial status [4]. Although mental illness has been documented throughout history, much stigma and discrimination are still rife in our society, and are often what affects people with a diagnosis more than their symptoms [5].

I believe that projects such as GCAM and EMPOWER as best practice models should be established globally to place mental health on the health agenda and achieve quality of life for those affected by mental health disorders.

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