

Baby blues rampant among poor

Contrary to popular belief, post-natal depression is worst in deprived rural areas, say experts

SUBASHINI NAIDOO

POVERTY is plunging many of South Africa's new mothers into depression.

High rates of post-natal depression in low-income black communities has exploded the myth that the condition mainly afflicts white and Indian high earners.

Perinatal experts say that in some of the country's sprawling informal settlements, a staggering one in three new mothers experiences post-natal depression — more than three times the number of women who suffer from the condition in Britain and the US.

In one study alone, researchers found that almost half of pregnant women in rural KwaZulu-Natal were depressed. A Standon-based social worker, Stephanie Urdang, said the typical profile of a woman with post-natal depression had been "older, educated and an A-type personality".

"These findings suggest a completely different picture, which is very concerning,"

Dr Simone Honikman, founder of the Perinatal Mental Health Project at Mowbray Maternity Hospital in Cape Town, said a recent audit and internal evaluation showed that almost 8% of 5 000 women screened at a facility showed signs of post-natal depression. She said a study in 1999 showed that 35% of new mothers from two areas of havelithsha were suffering from post-natal depression.

Venecia Barries, spokesman for the Parent Centre, a support group that provides home-based care to low-income areas in Cape Town, said the problem was severe in areas such as Mitchells Plain, Khayelitsha and Guguletu.

"We immediately know that

something is wrong when the baby looks as if he or she has been neglected — either left with a dirty diaper on or without bathing," said Barries.

The head of the South African Depression and Anxiety Group, Zane Wilson, said most women in lower-income areas were unaware of the condition.

"They may not even know there are treatment options. They are also scared of revealing that they are distressed."

"Their main fear is being labelled as mentally ill. They are afraid their children might be taken away from them," he said.

Mental health is rated the

third-highest contributor to the country's disease burden, after HIV/AIDS and other infectious diseases. The World Health Organisation has predicted that by 2010 mental illness will be the second-highest contributor.

The situation highlights a growing crisis, as the country has a serious shortage of mental health services.

Research conducted by the University of Cape Town's Mental Health Poverty Project into

the state of mental health services reveals that:

- There is only one psychiatrist for every 357 142 people in South Africa, one psychologist for every 312 500 people, and one social worker for every 250 000 people;
- There is only one psychiatrist per 3.5 million people in the North West;
- There are no hospital beds in rural areas for treating mentally ill children or teens; and
- There are no community facilities to treat mental illness in the North West and the Northern Cape.

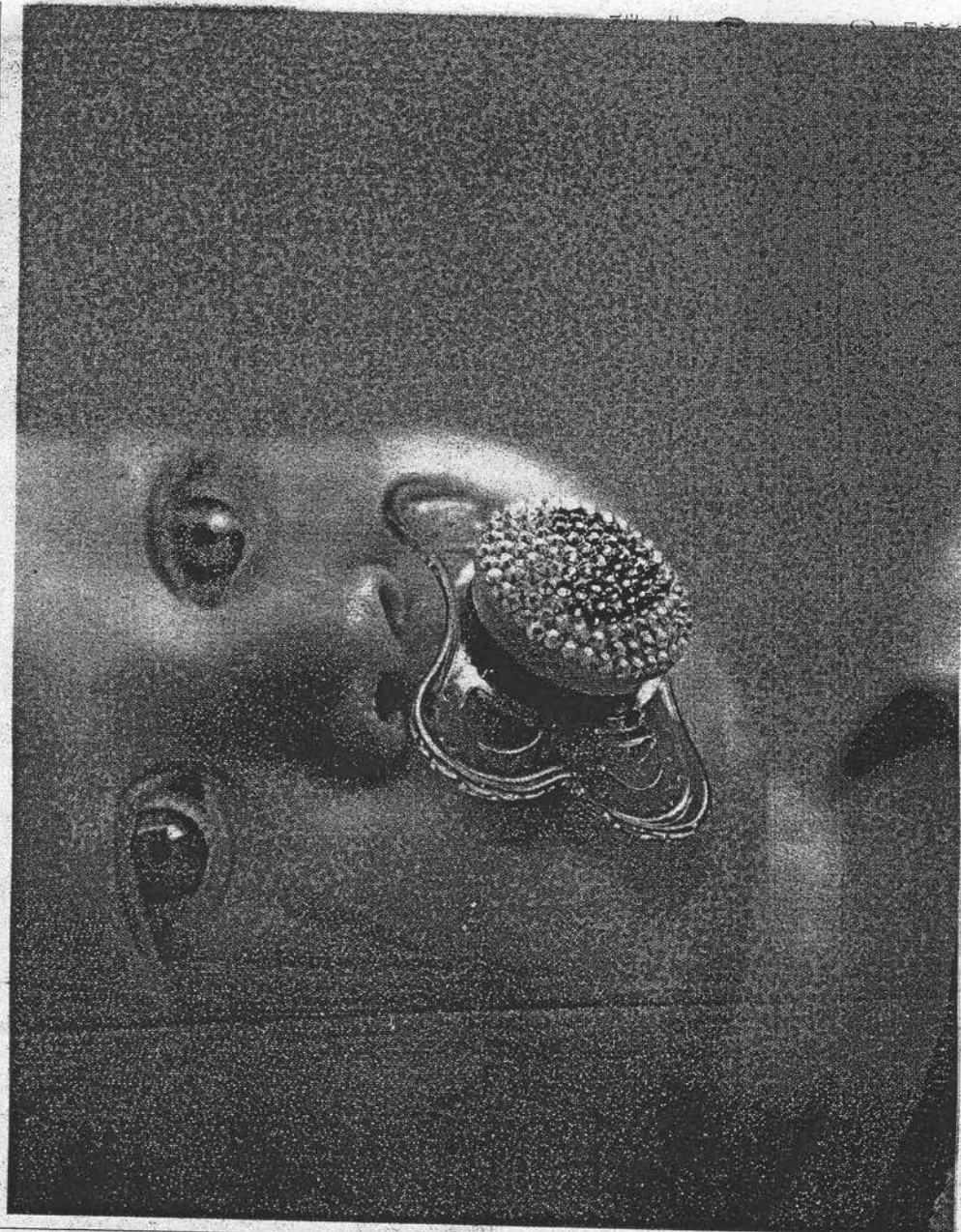
Head researcher Dr Crick Lund described said: "The country is in crisis and people are not taking this seriously. The mental health services are not adequate to meet the needs of people with mental health problems. "Poor mental health feeds into a higher suicide rate, which will ultimately cause more harm to our society."

He warned that post-natal depression was not exclusively a middle-class condition that affected high-achieving, perfectionist personality types.

"Evidence shows that the prevalence of post-natal depression is much higher in rural areas. Poverty is one of the main drivers. These women are living under conditions of multiple deprivation," said Lund, adding that other contributing factors were a breakdown of family structures, HIV/AIDS and limited services.

"It is vitally important that state hospitals integrate a basic assessment for mental health in pregnant women, as part of the routine checkup. Women should be screened for depression and anxiety during pregnancy and then referred to counsellors if necessary."

— naidoo@sundaytimes.co.za



FASHION SUCKER: Nine-month-old Milan van Huyssteen models a bling dummy. The crystal-encrusted pacifiers cost more than R300 each

Pictures: ESA ALEXANDER

TELL US: What should be done to support women with post-natal depression? Write to telus@sundaytimes.co.za