

UCT Department of Psychiatry and Mental Health Newsletter

Issue 12 – December 2020



UCT STUDENT PSYCHIATRY SOCIETY
PRESENTS:

COVID-19 AND SUBSTANCE USE

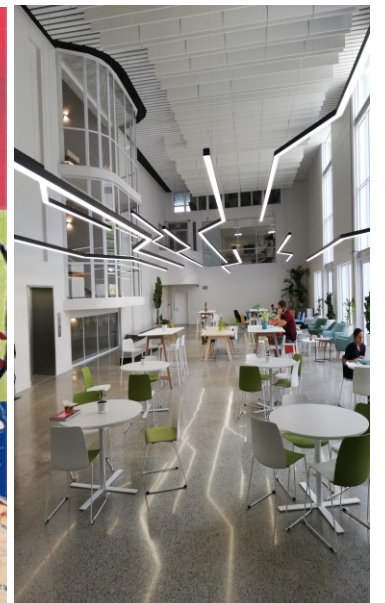
A discussion on the impact of the alcohol and nicotine ban on substance users, and evidence-based solutions to substance abuse - with Dr Lisa Dannat of the UCT addictions unit.

THURSDAY 27 AUGUST AT 6PM



Athak Sam Mlangeni, *Shabeni Queen*, 2015

ZOOM LINK TO FOLLOW



A NOTE FROM THE HOD

For a while it looked as though we could congratulate ourselves on having done a fine job during COVID, and end the year with an optimistic note about access to a vaccine, and moving forwards with mental health. But as I write this introduction to the last newsletter of the year, the second wave is threateningly large, and it's not entirely clear when the vaccine will be available to us.

Perhaps psychiatry & mental health is like that: our job is to help people maintain a balanced perspective on life, celebrating their progress and success, but also acknowledging sadness and loss. As our social responsivity report makes clear, as a Dept we have made enormous contributions to addressing COVID. But it has also been a difficult time, many of us have been ill, and many of us have lost family, friends, and patients.

As the year winds down, my view is that we can be proud of our contributions in 2020 to clinical services, community engagement, teaching, research, and transformation. At the same time, it ain't over till it's over, and I wish everyone ongoing strength with their work load and other responsibilities during the second wave. Do please stay safe and healthy over the holidays.

Warm regards,
Dan Stein



IN THIS ISSUE

COMMENTS

Thanks to department colleagues and others for submitting contributions to the newsletter. If you have any comments or suggestions for future newsletter issues or would like to volunteer to be part of the newsletter team please make contact with the editors.

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ADDICTION PSYCHIATRY

CONGRATULATIONS

By Dan Stein

Congratulations to Lisa Dannatt on the successful completion of her MPhil in Addictions. Lisa’s thesis is titled “The views of healthcare providers on providing a brief treatment to address methamphetamine use among patients with a dual diagnosis”. Lisa’s contribution has been invaluable in managing the emergency psychiatry service and the addictions psychiatry outpatients’ clinic at Groote Schuur, along with her supervision of MMed students and other ongoing research projects. ■



background and hopes for her time ahead. We are delighted to have both join the DCAP team and have enjoyed their contributions so far.

Dr Kebede graduated as a medical doctor and Psychiatrist from Addis Ababa University and completed her MPhil at the University of Cape Town in Public Mental Health. Upon her successful residency, Tigist joined Amanuel Mental Specialized Hospital, where she served in clinical and administrative positions for three years. She joined St Paul’s hospital millennium medical college in 2015. Aside from clinical work and teaching, she has been involved in research projects exploring mental health issues in children and women. She is an advocate and active participant of affordable and accessible mental health development in a resource-limited setting. In recognition, she received the best female researcher award by the college and Young Psychiatrist Award by Ethiopian psychiatric association in 2018. Tigist hopes to learn comprehensive clinical care and integrated child and adolescent mental health care system development for the country, where there is only one Child and Adolescent Psychiatrist.



CHILD AND ADOLESCENT PSYCHIATRY AND MENTAL HEALTH

WELCOME TO DRS KEBEDE AND ABDALHAI

By John-Joe Dawson-Squibb, Tigist Kebede, Khalid Abdulhai and Wendy Vogel

The Division of Child and Adolescent Psychiatry has two International sub-specialist registrar trainees currently doing their sub-specialist training in Child and Adolescent Psychiatry. Dr Khalid Abdulhai, from Sudan joined us in August 2019 and Dr Tigist Zerihun Kebede, from Ethiopia joined in October 2020. They are both with us for two-years as they train in the field of child and adolescent psychiatry. We asked Dr Abdulhai, who arrived in 2019 to write about his experience during this challenging 2020. Dr Kebede arrived earlier this year but then returned to Ethiopia given the lockdown restrictions. Having now recently returned to Cape Town we asked that she tell us a bit about her

Dr Abdulhai writes, “The year 2020 has been a real challenge in my career as a senior child psychiatry registrar. I came all the way from Sudan, where I work as a lecturer in the department of psychiatry at the International University of Africa. Since the spikes of



COVID-19 earlier this year there have been many changes in the standard clinical and academic work, with uncertainty hanging around, starting from the very personal things to more public things. Being away from my family, fears of contracting COVID and the unmet plans; all added insult to injury. Despite all of these challenges, some many unseen positives things give me the motivation to carry on. The clinical and training process has changed from face-to-face to online activities which help a lot in catching up with the curriculum. I have discovered more effective ways of communication with caregivers and colleagues, although they are not better than real-world connections! Teaching online is also a new experience for me. I have been involved in online afternoon teachings for undergraduate medical students and also for general psychiatry registrars in Sudan. As Prof de Vires usually asks in the supervision about 'Your Covid Thermometer', I would use that and rate the overall year 2020 as 9 out of 10 (fairly fruitful and satisfying). As we gradually move to the new normal with most activities back to usual, I would like to thank all my colleagues, supervisors and the African Paediatrician Fellowship Program (APFP) for their unlimited support. Thanks to everyone at DCAP and the Red Cross Children's Hospital for their unlimited support. Looking forward to 2021!" ■

CONSULTATION LIAISON PSYCHIATRY

CONGRATULATIONS

Congratulations to Jackie Hoare, Head of the Division. This Division was clinically absolutely key during COVID, has pioneered new curricula, and has brought in NIH grants to tackle the key issue of adolescent HIV. Jackie is recognized internationally for her work in this area and, indeed, has just been made a Fellow of the Royal College of Psychiatrists. ■

FORENSIC MENTAL HEALTH

SOUTHERN AFRICAN SEXUAL HEALTH ASSOCIATION WEBINAR

By Maryam Abbas

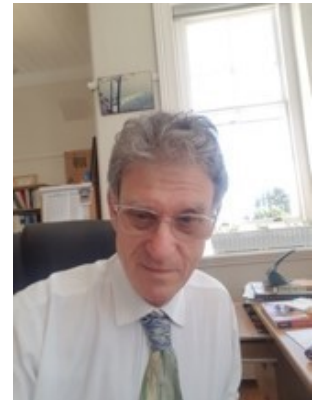


Where Human Sexuality, Sexual Offending & The Law Collide

The Intersection of Human Sexuality, Sexual offending and the South African Criminal Justice System.

Professor Sean Kaliski and Maryam Abbas presented to over 400 delegates at an international online CPD event titled "Where Human Sexuality, Sexual Offending and the Law Collide", organized by the Southern African Sexual Health Association.

Professor Sean Kaliski presented on "The Nexus between Personality Disorders, Sexuality and the Law", focusing on how personality disorders and patterns of aberrant sexual behaviour are managed within the Criminal Justice system, and how clinical experts can make management recommendations and assist jurist bodies in their deliberations. Often inappropriate sexual acting out is either a core trait or a consequence of some personality disorders. Each personality disorder has a characteristic pattern of aberrant sexual behaviour that has implications for possible interventions. The courts do not accept personality disorders as a defence, although it can be used successfully in civil litigation (such as in child



custody cases). The expert can make recommendations for management and offer explanations that assist juridical bodies in their deliberations.



Maryam Abbas presented on “Balancing Legislative Requirements and Human Rights in Supporting the Rehabilitation of People with Intellectual Disability who Commit Sexual Offences: A South African forensic perspective”. It is widely recognised that individuals with intellectual disability

have the same sexuality and intimacy needs and rights as others. These individuals do, however, find themselves in conflict with the law, often through their misunderstood expression of their own sexuality and sexual needs. Intellectually disabled individuals in conflict with the law for sexual offending behaviours, are often admitted to a forensic psychiatric institution for treatment and rehabilitation as prescribed by South African legislative Acts.

During their recovery process one is faced with the complex challenge of balancing the conflicting elements of legislation against their inherent human rights to allow them to enjoy a state of physical, emotional, mental and social well-being in relation to their sexuality (WHO, 2006a). ■

GENERAL ADULT PSYCHIATRY

A MASTERS IN HEALTH ECONOMICS, POLICY AND MANAGEMENT

By Qhama Cossie

In 2018/19 UCT Dept. of psychiatry and the Western Cape Department of Health granted me the privilege of

taking a sabbatical in order to pursue further studies. At that point, I was feeling restless professionally. After 12 years in the department, starting from registrar training, I felt that I had obtained good exposure and experience as clinical expert and professional but I felt undercooked as a collaborator, health advocate and leader. I wanted to learn from experts in the health field and to interact with and learn from people working in other countries and other health care sectors. That is how I got to be enrolled in the Executive MSc in Health Economics, Policy and Management (HEPM) at the London School of Economics & Political Science.

The two-year modular degree integrated rigorous health economics training with insights into the policy process, the design and analysis of health services research, and discussed current health management problems. The programme brought together leading UK, US, and European academics and policy experts to train change-makers and leaders in the health care sector. I got the opportunity to study alongside established professionals from diverse backgrounds, including: clinicians, health services managers, and specialists from insurance funds, governmental and international agencies, and health care, pharmaceutical and consulting firms from across the globe.



Above: The MSc HEP group.

The programme was delivered across two years, with four, two-week modules taking place in London. The first year covered theories and concepts of health financing and health economics, in depth case studies of health system and health care management, and the

necessary methods to optimise resource allocation and cost-effectiveness in the health care sector. In the second year, we were allowed to customise our curriculum by choosing from a range of optional modules that were intended to support our professional background and career goals. Examples of courses offered were Health Administration and Management, Health Care Quality Management, Measuring Health System Performance, Principles of Health Technology Assessment, and Behavioural Insights for Health Incentive Design.

Finally, we had to write a dissertation on a health-care focussed topic of our choice. My dissertation was titled 'Knowledge and attitudes towards patient costs: a survey of psychiatrists in South Africa'. The aim of the study was to investigate the cost-awareness in mental health physicians (psychiatry medical officers, psychiatry registrars, psychiatrists) in South Africa. Specifically, the study surveyed the knowledge of the costs of commonly used investigations and treatments among mental health physicians in South Africa and identified the factors associated with better knowledge of costs and it assessed the attitudes of physicians towards patient costs. The results indicated that information on costs was difficult to find, in general, the awareness of costs was poor, mental health physicians working in the private sector had better cost awareness than those in the government sector, physicians expressed that they had not received sufficient training on managing costs and were interested in additional formal training on managing healthcare costs and despite the lack of training, physicians considered themselves knowledgeable on costs and they considered these when making clinical decisions. The study conclusions were that future research should focus on the accessibility and reliability of medical cost information and it should also focus on whether locally adapted educational methods targeting undergraduate and postgraduate medical students can achieve improvements in cost awareness.

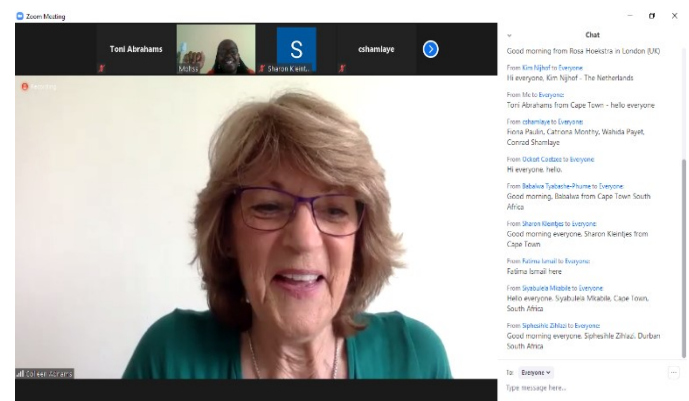
At the conclusion of the programme, I received the good news that I had won the Brian Abel-Smith prize that is awarded to the student with the highest dissertation mark in each programme year group. It was a pleasant way to end an exciting journey of learning and personal growth. ■

INTELLECTUAL DISABILITY MENTAL HEALTH

VIRTUAL SYMPOSIUM: NETWORKING FOR INTELLECTUAL AND DEVELOPMENTAL DISABILITY (IDD) RESEARCH IN AFRICA

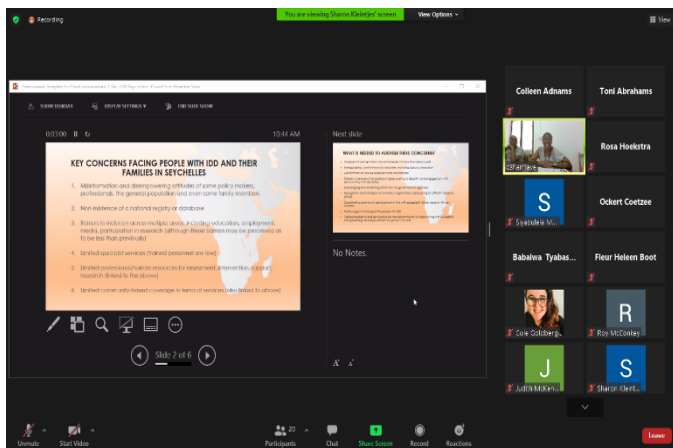
By Sharon Kleintjes

Prof Colleen Adnams, Emeritus Professor in the Division of ID, assumed the Presidency of the International Association for the Scientific Study of Intellectual and Developmental Disabilities (IASSIDD) in January 2020. At the IASSIDD World Congress held in August 2019 in Glasgow, Scotland, Prof Adnams convened an informal special meeting of congress delegates working in IDD in Africa, to discuss developments in IDD research in Africa.



Above: Prof Colleen Adnams facilitating the virtual meeting.

Participants voiced strong interest in networking in the future, and possibly starting a research forum for collaborating in research across the continent, but also noted financial constraints which might be a barrier to this idea. With Covid-19 highlighting the value and ease of access of online work this year, Profs Kleintjes and Adnams were inspired to end a difficult year on a positive note, by hosting a year-end online Symposium for this group to explore possibilities for collaboration through this medium.



Above: Presentation from Fiona Paulin addressing the key concerns facing people with IDD and their families in Seychelles.

The meeting, convened at short notice, on the 1st December, was attended by 20 researchers, clinicians and post-graduate students in the field of IDD from South Africa, Namibia, Zambia, DRC, Uganda, Ethiopia and the Seychelles, as well as 3 researchers from the Netherlands, Ireland and the UK working in Africa. Brief presentations on the service and research situation in three of the African countries set the scene for discussion of common concerns and areas for development in research. Discussions echoed a need for research to inform and advocate for service developments which support families in their communities, as they are the primary carers of their children and adult relatives with IDD in Africa; the need for multisectoral involvement in this research, particularly in the areas of health, education, social services, housing and employment; and the need to address poverty experienced by families through

research to support contextually appropriate poverty alleviation programmes.

The value of a regular forum for online discussion to promote collaborative work was supported by the group, and the Division of ID's offer to provide logistical support to future meetings was well received. Some of the areas which the group felt they could benefit from through such a forum included:

- Providing access to ideas, expertise and experience in conducting research
- Sharing evidence and best-practice
- Training and mentoring of researchers at country level
- Skills development to attract research funding for projects
- Providing opportunities for researchers to showcase their work
- Providing an avenue for parents, communities, and people with IDD to voice their lived experience and needs through participatory research
- Increasing participation of researchers, clinicians and community structures working with people with IDD in rural areas
- A space to explore possibilities for coordinating multi-centre research on what can work sustainably in the African context
- Networking to introduce IDD research agenda to their Ministries, Universities and Departments where that is not yet on the agenda
- A space from which to explore, at a later stage, collaborations with similar networks already in existence in Africa ■

CONFERENCE ON LEGAL AND ETHICAL CONCERNS REGARDING PEOPLE WITH INTELLECTUAL DISABILITY AND THE LAW

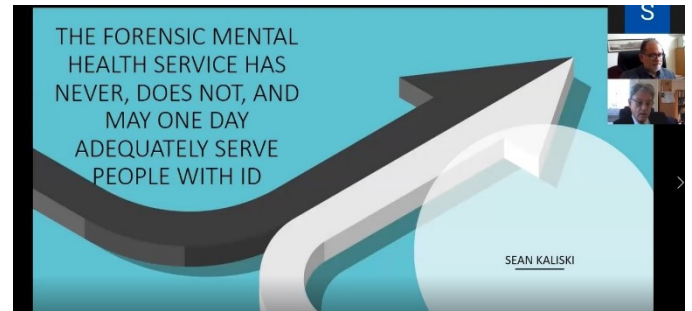
By Sharon Kleintjes

The South African Human Rights Commission Report on the November 2017 National investigative hearing into the status of mental health care in South Africa (SAHRC, 2019) notes that current forensic mental health services are dilapidated with a shortage of staff for observations and state patient care and rehabilitation. It recommends a national audit of forensic psychiatric observation facilities across South Africa, as well as development of provincial plans for the revitalisation of forensic (and non-forensic) mental health infrastructure. Within the broader forensic service, the assessment and rehabilitation needs of observation and state patients with Intellectual Disability warrants particular attention in terms of the adequacy of the legal and clinical framework within which they are assessed, and disability-related tailoring of rehabilitation programmes. With this in mind, Dr Peter Smith (Pictured Second Below) and Ms Maryam Abbas of the Division of ID convened a national mini-conference, on 6th October, of clinicians, policy makers and other sectoral stakeholders to promote discussion of key concerns in the field.



The conference provided a review of criminogenic theories (Dr Mo Nagdee); a historical review of and recommendations for legislative, policy and service change (Prof Sean Kaliski); an overview of impending

national actions to address legal and policy concerns related to forensic ID services (Dr Eva Mulutsi); judicial considerations (Justice VP Saldanha) (Pictured First Above); and NPO-based strategies to improve access to justice (Ms Sarah Ntaka); and concluded with a keynote addressing several ethical areas for attention in forensic service improvement (Prof Anthony Pillay).



Above: Presentation by Prof Sean Kaliski addressing the status of people with ID in the forensic mental health system.

Potential actions proposed included:

- Improving our understanding of theories that inform our perceptions of drivers of offending behaviour
- Adopting a lifespan approach for children, adolescents and adults with ID who present with offending behaviour
- Concerted action to fast-track review of outdated legislation and policies which are a barrier to modern human-rights-based service delivery
- Lobbying for the investment case for mental health under development at national level to include appropriate mental health service for persons with intellectual disability
- Considering the merits of establishing a National Forensic Service
- Defining a core package of rehabilitation services for state patients



Above: Presentation by Dr Eva Mulutsi addressing legal and ethical concerns related to people with ID and the law.

- Address lack of community/family services to minimise hospital-based long stays through community placements where possible
- Designing fit for purpose, best practice-based rehabilitation programs
- Replacing assessments based on concepts such as mental age with a focus on functionality, experience, and contextual issues in assessing capacity
- Providing input to the impending review of the National Mental Health Policy 2013-2020
- Collaboration across the forensic platform to bring best practice to a national program of work
- Addressing barriers to colleagues within the justice system making decisions which promote rights and recovery opportunity for the offender with ID
- Providing training of practitioners across sectors
- Auditing services and reviewing data we have, to inform planning
- Developing an information system to inform planning, monitoring and evaluation of the services
- Research to inform legislative and policy review, service and program development; and cross-sectoral collaboration
- Engaging the voices of people with ID and their families in all processes



Left and Right: Prof Sharon Kleintjes and Fatima Ismail scribing the presentations. Centre: Nikita Titus ensuring smooth running of the virtual conference.

Special thanks to Ray Mbatsane and the Alta du Toit School band for providing band recordings, Charlotte Moses for facilitating access to Alexandra Hospital patient art work (Pictured on Cover), Mohamed Abbas

for programme and slide show designs and Aimee Isaacs and Nikita Titus for technical assistance. ■

AFRICAN JOURNAL OF DISABILITY

By Charlotte Capri (AJOD Editor-in-Chief)



African Journal of Disability (AJOD) publishes a wide range of article types which are all available for free to users or institutions anywhere in the world. Since articles are available online free of cost, it increases the potential for published articles to be widely cited, read, downloaded, distributed, searched, or linked as full text articles. The authors retain the non-exclusive right to do anything they wish with the published article(s), as long as they cite AJOD with details of the original publication. AJOD authors specifically have the right to post their article on their own websites, on their institution's websites, or in institutional or other repositories.

AJOD is the official journal of the Centre for Rehabilitation Studies (University of Stellenbosch), the Centre for Disability and Rehabilitation Studies (Kwame Nkrumah University of Science and Technology), and AfriNEAD. It is an interdisciplinary journal and focuses on all aspects of disability. Founded by Prof Leslie Swartz with a first volume published in 2012, AJOD has become a credible publication for promoting disability scholarship in and from Africa over the years. For the period 2016-2019, AJOD received an average of 80 new manuscript submissions per year. Advised by an editorial team with vast experience and variety in expertise, our journal helps authors develop their manuscripts with support from committed reviewers.

The quality of AJOD articles, and the credibility and reputation of our journal, crucially depends on the experience and commitment of our peer reviewers. Since 2016, our manuscript rejection rate in relation to new submissions has been climbing as an intended function of stringent double-blind peer review. Thank you to all our reviewers for gifting us your invaluable time and expertise amidst pressures of work.

AJOD continues to introduce and critically discuss issues and experiences relating to and supporting the act of better understanding the interfaces between disability, poverty and practices of exclusion and marginalisation. Our articles aim to bring serious scholarly analysis to bear on problems of disability shared across the African continent. Now in its ninth volume (2020), AJOD is read in 216 countries world-wide. AJOD is DHET accredited and subsidy earning, and all published articles are indexed in Scopus, PubMed Central, Scielo SA, Hinari. AJOD is also indexed in African Index Medicus, Norwegian Register for Scientific Journals, Series and Publishers (Level 1), Directory of Open Access Journals, EBSCO Host, GALE (CENGAGE Learning), ProQuest, Web of Science (Other Coverage, Emerging Sources Citation Index, ESCI), Sabinet, and Google Scholar.

The full text of every one of our articles is also deposited in four different archives to guarantee long-term preservation. AJOD's parallel review processes includes Double-blind peer review by external/independent reviewers with a minimum of 2 to 3 peer reviewers per paper. Two to ten reviewers are invited to review per paper. A total of 115 different reviewers were used in 2019. AJOD is also annually reviewed externally and independently by the Academy of Science of South Africa, Committee of Publication Ethics, PubMed Central and Scopus.

If published in AJOD, we think your research presents results of primary scientific research, reports new findings, is deemed scientifically sound, provides enough detail so that studies can be reproduced, provides conclusions supported by data, meets

applicable research ethics and integrity standards and adheres to appropriate conventions of data availability.

Future developments for AJOD will aim to focus on the accessibility of knowledge as it relates to users with intellectual and developmental disabilities, and we have been thinking about video and audio abstracts as well as alternative manuscript types.

We continue to welcome any input and suggestions from our communities, from anywhere on our continent, for any further ideas that we can use for the potential advancement of our field. Apart from the current urgency of African disability issues as impacted by Covid-19, AJOD continually welcomes manuscripts on all aspects of disability in the developing African context. To our authors, reviewers, and external investigators...thanks for keeping us on our toes!

Visit <https://ajod.org/index.php/ajod>

Contact editor@ajod.org or

Charlotte.Capri@westerncape.gov.za ■

CONGRATULATIONS ON RESEARCH FUNDING

Congratulations to Siyabulela Mkabile on being awarded a UCT Research Development grant to cover publication costs for his PhD outputs.

Congratulations to Babalwa Tyabashe-Phume, Cole Goldberg and Siphesihle Zihlazi, on being awarded Vera Grover scholarships for their PhD and master's studies.

Congratulations to Toni Abrahams for receiving an NRF Thuthuka award and UCT Research Development grant for her PhD study. ■

PSYCHOPHARMACOLOGY AND BIOLOGICAL PSYCHIATRY

FAREWELL TO FLEUR HOWELLS

By Henk Temmingh



I met Fleur (Pictured Left) in early 2008. I had just started working as consultant psychiatrist at Valkenberg in the acute psychotic wards. She had just completed her PhD and was joining as a post-doc in our department.

Fleur was working with rats. I was dealing with human suffering. The gap seemed wide. Nevertheless, we struck up a conversation of over 2 hours on EEGs and P300 event related potentials, sensory gating, and schizophrenia.

I was writing a protocol, of what would later become part of my PhD. She was just starting on her journey with the human subject. Over the next few months and years, we developed a collaboration that grew into a small group of masters, PhD students and post-docs.

We started out with grand plans. Valkenberg hospital where I was working, hadn't seen a research publication for about 25 years. We were going to change that. We followed the advice of Prof. Stein to attempt the integration of research with clinical services. We trained in structural clinical interviewing. The idea being, more structured and thorough clinical interviews, better diagnosis, better clinical care.

Moreover, we would at the same time go beyond the dogmas of clinical folklore and be investigating the mysteries of the mind and brain. We held meetings and workshops where we trained colleagues in structured clinical interviewing. Going was tough. As we soon

discovered, my clinical colleagues had other things to do.

Fleur drove on. Her manner is upbeat, Gung ho, "just do it". She wrote her first protocol as principle investigator. We were investigating cortical function in order to delineate the aetiology of different psychotic disorders using a combination of EEG and transcranial magnetic stimulation as well as MRI neuroimaging techniques.

We started recruiting patients in 2012. Going was tough. Long hours of clinical interviewing. Fleur organising logistics around participant flow. In those days the MRI scanner was at Tygerberg campus. Fleur remained upbeat. We ran out of electricity due to Eskom troubles. "Some problem with the coal getting wet", Fleur explained in her usual upbeat manner.

"Should be sorted, then we can resume...". I thought maybe our next project should not involve electricity. (Up till now I was a boiling frog in terms of load shedding as I reside in a load-shedding free, sweet-spot).

Our hard toil and efforts did pay-off. We published our first article in an international peer-reviewed journal. We were now in the translational neuroscience business. More papers followed. We did indeed make the changes we hoped for...Then, despite my misgivings about electricity, Fleur steamed ahead, and our second study was launched in 2016.

This time we were investigating neuro-inflammation using neuroimaging in schizophrenia and methamphetamine psychosis. Luckily the scanner was now at the Groote Schuur, which made going a lot easier.

In the years past Fleur excelled as a leader and manager. As if a PhD was not enough, she completed an MBA degree. This training strengthened and bolstered her highly efficient management style. Fleur was promoted to associate professor. Her resume is impressive...

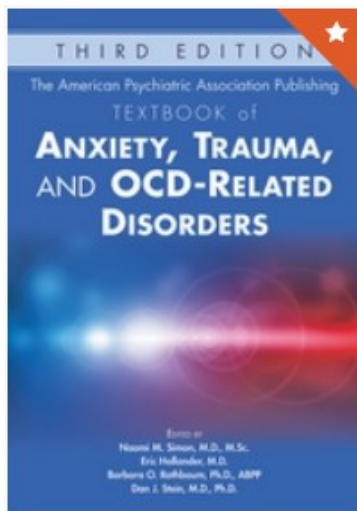
They say most people don't move beyond 50km of where they are born. Most of us probably fall in that category, we live close to our family and friends. For Fleur this was a bit different as most of her family had already emigrated.

It was with sadness that I heard that she will be following suit and leaving for Europe in 2021. The coronavirus pandemic had made the shortcomings of things related to electricity, and distances, more apparent. But I am certain that Fleur will still exert her influence and actively contribute toward psychiatry research at UCT, even whilst wearing a different hat. ■

APA PUBLISHING TEXTBOOK OF ANXIETY, TRAUMA AND OBSESSIVE-COMPULSIVE DISORDERS

By Dan Stein

I'm writing this brief note on "American Psychiatric Association Publishing Textbook of Anxiety, Trauma, and Obsessive-Compulsive Disorders" because Toni, the editor of this newsletter, has asked me to. Given how much effort Toni puts into our newsletter, when she says "jump", I naturally respond "how high?".



Having put fingers to keyboard, the first issue that comes to mind is "why edit a book?". After all, I have to admit that whenever I edit a book, I have invariably at some point during the process said to myself "this is the last one!". Getting busy contributors to finalise work on time can be, as they say, like herding cats.

What typically cues a new edited volume is a thought: "Here's an important gap, someone should do this!" And that's hard for me to resist. When I noted that the American Psychiatry Press was doing textbooks on key specialties and disorders, I immediately thought "Here's an important gap for anxiety disorders". Before my impulse control mechanisms had time to trigger, the proposal was in.

Clearly, though, there must be some rewarding for editing, or this wouldn't be the 3rd edition of this textbook that I'm involved with. First, it's a chance to talk with wonderful colleagues. Second, it's a chance to learn about cutting-edge ideas and data. Third, now and again a reader says, "that was really useful, thank you". Hence the difficulty of beating this addiction (I've passed 35 volumes now, I'm afraid).

This particular edition of the volume was led by Naomi Simon, who was wonderful to work with. Other editors were my early-career mentor Eric Hollander, and Barbara Rothbaum - a leading psychologist in this area. The title of volume was changed to reflect the DSM-5 approach to these conditions. We hope it provides an up-to-date and comprehensive overview, that's choc-full of practical clinical guidance.

Going forwards, I am going to change tack. I've been involved with editing a couple of volumes in a series on global mental health, published by Elsevier. I am thinking that it's time for other members of the Dept. to now contribute edited volumes to this series. I'm happy to provide guidance as needed, so I remain gainfully occupied. But my own days of cat herding are, I believe, numbered.

Visit <https://www.appi.org/Products/Anxiety-Disorders/American-Psychiatric-Association-Publishing-Textbo> ■

PSYCHOTHERAPY

DIVISION UPDATE

By Lameze Abrahams



The Division of Psychotherapy is very excited to welcome its first registered PhD Candidate, Daniel Rabinowitz (Pictured Left), who is supervised by Dr. Helena Thornton. Daniel is a clinical psychologist working in private practice as an associate clinical psychologist at Cape Town Psychologists in

Sea Point, where his main modality of treatment is Cognitive Behaviour Therapy (CBT). Daniel completed a Master of Arts in Clinical Psychology at the University of Johannesburg in 2013. Since then, he has worked in a formal capacity as a clinical psychologist in four psychiatric hospitals, and one district hospital. His proposed research intends to (i) investigate the feasibility of task-shifting DBT to community workers, and (ii) to investigate the acceptability of task-shifted DBT for street dwellers with alcohol-related disorders. Both feasibility and acceptability will be investigated, in parallel, using a mixed-methods approach. The results of the research will inform future investigation into whether DBT may be task-shifted to community workers for vulnerable and marginalised populations in South Africa.

We are also looking forward to working with Dr. Kader as an honorary appointment to our Division. Dr. Kader graduated with a PhD at the Department of Psychiatry, University of Stellenbosch in 2013, with areas of specialisation including substance abuse, mental health and HIV. Dr. Kader qualified as a Clinical Psychologist in 1999 and is registered with the Health Professions Council of South Africa. She has provided clinical training, supervision and consultation to psychology students as well as students across various departments since 2000. Dr. Kader has extensive teaching and training experience in substance abuse prevention and treatment, and addiction science. She trained as a Global Master Trainer for the Colombo Plan (ICCE) since 2014. She also participated in the training of health

professionals in HIV, Substance Use and Mental Health, as a research support specialist in the Department of Psychiatry and Mental Health, Division of Addictions between 2018-2020. In this role she provided curriculum leadership for the SA HIV ATTC in developing material for substance use, HIV and mental health, amongst others. She also served as convenor of the Post Graduate Diploma in Psychotherapy, UCT from 2013-2014. Dr. Kader has several research publications as author and coauthor in peer reviewed journals, with a focus on substance abuse and addiction science; and includes a range of at-risk South African populations. ■

NEUROPSYCHIATRY

FAREWELL TO LENA ANDERSON

By John Joska

“The HIV Mental Health Research Unit bids farewell to Lena Andersen (Pictured Right) at the end of 2020. Lena leaves us as she has re-located with her family in her native Denmark, to take



up a position with Wietse Tol in his Global Health Unit. Lena has been with the Unit since 2009, when she joined us through the PEPFAR/ANOVA program. At the time, she came with CBT training, and early on demonstrated her passion and commitment to scaling up mental health services, and evidence-based psychotherapies in particular. She obtained a CIDRI grant award through the Wilkinson Unit, and used this to conduct pilot work in CBT in isiXhosa speakers, as well as to begin her work on developing a locally developed tool for measuring depression in isiXhosa speakers. At an ABCT conference, where she is a regular

presenter, Lena met Steve Safren then from MGH, now at Miami. This was instrumental in linking Steve with the Unit, and after some years of writing and submission struggle, the CBT-AD RO1 was funded by the NIMH in 2014. Lena was the project officer on this study. She trained nurses, supervised them, and oversaw the execution of the study. The final results are indeed promising and will most probably be published in a high impact journal. Lena took on other key roles in the Unit- she organised our journal club, she mentored junior staff, she listened to people in distress, and she brought her high energy enthusiasm and passion to the space. She wrote a highly innovative K award using an adaptive intervention design, which unfortunately has not been funded... yet. But her work has triggered many new ideas and projects, and indeed she leave a HUGE gap in the Behavioural Medicine lab. We had plans to form a new Division of Behavioural Medicine, but alas, that will need to wait for another day. Lena will be sorely missed, but she remains linked to us as a consultant on Kathy Sikkema's Someleze (trauma) study. Hamba Kahle, sisi!" ■

PUBLIC MENTAL HEALTH

CPMH HOSTS WEBINAR TO COMMEMORATE WMHD

By Maggie Marx

To commemorate this year's World Mental Health Day, the CPMH and the South African Depression and Anxiety Group (SADAG) co-hosted a webinar on what mental healthcare in South Africa should look like.



WMHD (from top left to bottom right): Prof Crick Lund, Dr Sindi van Zyl, Thabo Xaba, Prof Katherine Sorsdahl, Cassie Chambers and Dr Marlise Richter.

On 9 November 2020 the Alan J Flisher Centre for Public Mental Health and the South African Depression and Anxiety Group (SADAG) co-hosted a webinar to commemorate World Mental Health Day. This year the World Federation for Mental Health has determined the global theme to be "Mental Health for All: Greater Investment – Greater Access". The invited speakers were Prof Crick Lund, a professor in Global Mental Health at the CPMH at the University of Cape Town as well as at King's College London. He spoke on the strong investment case for mental health in South Africa.

Cassie Chambers, Operations Director at SADAG, then spoke on their experience over these last past months of moving their system completely online. She also shared some challenges and successes during their journey. The highlight of the webinar was when two service users, Dr Sindi van Zyl and Thabo Xaba, shared their experiences of living with mental illness in South Africa. The webinar ended with a short question and answer session.

Please view the webinar [here](#). The presentations in PDF form can be downloaded here: Prof Crick Lund – [PDF](#) Cassey Chambers – [PDF](#) ■

ALAN J FLISHER MEMORIAL LECTURE: IMPLEMENTING AND SCALING UP INTEGRATED PRIMARY MENTAL HEALTH CARE IN THE REAL WORLD

By Maggie Marx

This year's Alan J Flisher Memorial Lecture, on 3 November, was delivered by Prof Inge Petersen on implementing and scaling up integrated primary mental health care in the real world.

In this lecture, Professor Inge Petersen, public mental health psychologist and Principal Investigator of the Southern African Mental health Integration ([SMhINT](#)) research consortium, shares the use of a three-pronged approach that adopts implementation science, technical support and systems strengthening, to bring evidence-based task sharing interventions for common mental disorders into routine primary health care services in the province of KwaZulu-Natal in South Africa.

Professor Petersen is the [Director of the Centre for Rural Health, College of Health Sciences, University of KwaZulu-Natal](#). She is a Research Professor in the College of Health Sciences, UKZN.



Annual Lecture: (from left to right): Prof Inge Petersen, Prof Katherine Sorsdahl, Dr Claire van der Westhuizen, Prof Marguerite Schneider.

Prof Petersen leads and has participated in a number of local and international research consortia focused on closing the treatment gap for mental disorders in South Africa and other low-and middle-income countries, through integrating mental health into primary health care.

Please view the webinar [here](#). Please download the presentation [here](#). ■

PERINATAL MENTAL HEALTH PROJECT (PMHP) HIGHLIGHTS

By Simone Honikman

In the last quarter of 2020, there are four highlights to note from the PMHP. PMHP set up and chaired a virtual workshop with a range of South African stakeholders from the academic, policy and development sectors to provide comment on the costing research draft report of the Global Economics in Maternal Mental Health (GEMMH) project. This project is led by the London School of Economic and Political Science in collaboration with Global Alliance for Maternal Mental Health (GAMMH), global researchers and practitioners active in this field and the PMHP. This project aims to develop the economic case for improving maternal mental health in low- and middle-income settings and South Africa was chosen as the first case study. The workshop provided invaluable feedback for improvement to the costing component of the work as well as guidance for the return-on-investment component which is to follow in 2021, as well as translation and uptake considerations for national government.

Director, Simone Honikman, together with British-Sudanese obstetrician colleague, Dr Saadia Noreldeen,

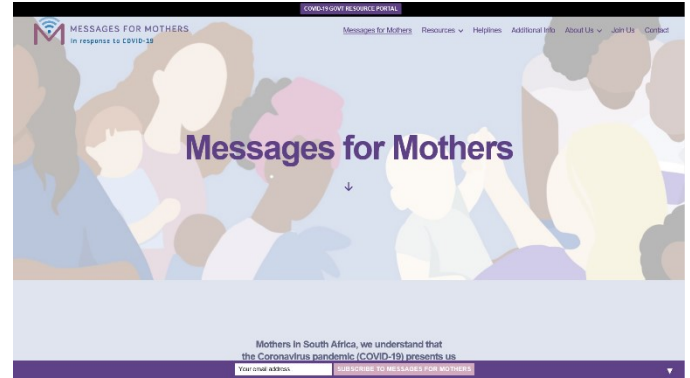
was invited to give a workshop on maternal mental health at the Africa regional congress of The International Federation of Gynecology and Obstetrics (FIGO) that was originally planned as an in-person [event](#) in Kigali, Rwanda. The event became virtual and Simone and Saadia were able to use a range of media to engage participants from Rwanda, Brazil, Côte d'Ivoire, Zimbabwe and the Philippines towards their own strategic development of maternal mental health services in their settings.

In addition, Simone will deliver an oral presentation at the main conference on health systems strategies for integrating mental health care into maternal and child health in low resource settings.



Back row: Simone Honikman, Rita Stockhowe, Liesl Hemanus, Thanya April. Front row: Sally Field, Siphumelele Sigwebela

The Messages for Mothers ([M4M](#)) coalition, of which PMHP is a founding member, recently translated all their Physical Health, Mental Health and Child Health content regarding COVID-19 into additional languages. The PDFs and infographics (for social media sharing) are now available in English, Afrikaans, isiXhosa, isiZulu, Sepedi and Sotho. A 'How-To' guide has been developed so that any visitor to the website may easily navigate and disseminate the open access content in a range of different formats. This and more updates from the Messages for Mothers coalition can be found in the latest newsletter [here](#).



Clinical Services Coordinator, Liesl Hermanus, was invited by Voice of the Cape radio station to do a segment on postnatal depression and its impact on breastfeeding. Liesl spoke about the symptoms of postnatal depression and anxiety and how sleep is particularly important for new mothers' mental health and capacity to breastfeed. It was a great opportunity to talk about the PMHP and these complex relationships to a large public audience. The podcast is available [here](#). ■

REGISTRAR TRAINING COMMITTEE

2020 ANNUAL REFLECTION

By Nyameka Dyakalashé

New appointees: In the 2020 academic year we welcomed Dr Nada Lagerstrom who previously trained at UCT as our Registrar teaching programme coordinator. She replaced Dr Charles from 1st April 2020. Five new registrars were appointed from the 1st of February; Dr Mpho Mahlakametsa, Dr Hassina Sablay, Dr Syed Nadvi, Dr Inette Swart (1st March), and Dr Michelle Swartz (from 1st August). We wish them an enjoyable time.

Reg reps: Dr Bailee Romburgh and Dr Richard Goncalves served as the registrar representatives for the 2020 academic year, and we would like to thank them for their contribution.

Academic achievements: Research: Dr Adam Fakrooden will be graduating MMed Psychiatry Part 3 in a

ceremony that will be held virtually in December 2020. A third year registrar Dr Jasper van Zyl who published his MMed thesis in the South African Journal of Psychiatry titled "Motives for deliberate self-harm in a South African tertiary hospital" was awarded the best UCT Registrar research 2020 by the SASOP: Western sub-group during a virtual meeting held on 31st October 2020.

Exams: We congratulate the following registrars, namely Dr Kavi Naidu and Dr Kathryn Grobler, who despite being the first group of candidates to be examined in the SBA written format in the first semester, and virtually for the oral part in the second semester, passed the Part 2 final exit CMSA examinations.

Goodbyes: The RTC will be bidding farewell to Dr Wendy Vogel and Prof Sean Kaliski who will be retiring as of 1st March 2021 and 1st April 2021 respectively. The legacy they leave behind, their immense contribution and support to the registrars and to our department and province has been phenomenal. Dr Carla Freeman who has been employed on a contractual post for the past several years, is also vacating her post at the end of the year. Carla has played a pivotal role in teaching neuropsychiatry and we would be forever indebted to her.

Training workshops: The CMSA conducted an examination workshop this year, from 20-21st November 2020 for the fourteen registrars who will be writing part 2 next year.

Impact of Covid-19 pandemic: As the world was gripped by a novel virus that affected over 55 million people worldwide, registrars were amongst the frontline workers who braved a virus that everyone feared. Five were infected and fortunately survived Covid-19. The second semester CMSA exams were postponed. Four of our registrars will have their contracts extended as a result. Dr Imraan Tayob in partnership with Vodacom was amongst the forces that provided cell phones to patients who were hospitalised at Groote Schuur so

they could keep contact with their families who could not visit them.

For 2021 the RTC will focus on strengthening Educational mentor relationships, engaging with the new HPCSA, UCT & CMSA regulations regarding training, research & new examination format. In line with UCT Faculty of Health Sciences mission, we will strive to simplify the registration & research administrative process.

We would like to thank Ms Vuyo Mafanya, our post-graduate administrator, for her support and going beyond the call of duty in making our work easier. We also wish to thank all our administrative staff, lecturers, clinical colleagues and our HOD for their support, wisdom, and enthusiasm for training & teaching our registrars. ■

SEVEN TIPS FOR PASSING YOUR PSYCH PRIMARIES

By James Burger

The College Primaries have long had a reputation for being tough. These are some simple principles that I found helpful for getting through primaries.



1. Remember that they want to produce psychiatrists

This means they want to pass people. Keeping this in mind helps me think about who is designing and marking my exam without being too intimidated.

Our side of the bargain is that we know enough of what they believe is required to be a competent psychiatrist. Get familiar with what the College expects you to know. A good starting point is the College exam blueprint and past papers. However, still expect the unexpected and predict that you will need to be agile.



2. Know the basics

When it comes to primaries, learning broader is better. Primaries are designed to ensure we have a

basic foundation. Sometimes it can be useful to start broad, build a framework, then build on that.

3. Repetition is key

You'll have to repeat the information a few times should you want to remember it. The trouble with casting your resources net too wide is that you will not be able to get through enough repetitions to get it to stick. I ended up basically choosing my favourite textbook for each broader area.

Repetition is also important for exam technique. Practise your exam-writing and make sure your timing is on point.

4. Find your groove, and then trust the process

For many, it has been an age since writing exams – you and your responsibilities have probably changed a lot since then. Your learning style may also have changed. Updating your personal study techniques can give you the greatest shot at success.

Then... back your studying ability. Sometimes when we get close to exams we see how others are studying and feel pressured to copy their style. Trust your process. The end goal will come.

5. Collaborate, but don't compare

One of our strengths is in how we work together. Ask people for advice. Give people useful resources. We're all in this process together, after all.

However... we are all on our own journey. Resist the temptation to compare yourself to your colleagues. It may be based on incorrect assumptions, and we all progress in different areas at different times.

6. Find meaning in what you are learning

Finding meaning in what you are doing can be useful for staying motivated. Learning with the application in mind can help to motivate and also to help retain the information. Periodically studying areas of psychiatry you find more interesting could also give you that extra kick to keep going.

7. Manage your own headspace

You have to actually get to the exams to be able to pass. If you're not in a good headspace, performing will obviously be a challenge. Give yourself permission to do what you need to do and make sure you allow yourself time to recharge.

Passing exams at this stage of our careers is normally less about how much you know, and more about how you can get that out in an artificial and hyper-stressed environment. Finding ways to manage your performance anxiety is key.

Be kind to yourself. And surround yourself with colleagues who motivate you and support you, not the other way round.

You're in a pandemic. Timelines will be out. That's okay.

You're also allowed to have a life, whatever that means to you.

Good luck out there

Enjoy the process and all the best for the exams! These are just some of the principles which helped me get through – hopefully they help you reflect on the process and find the studying principles which are important to you. Happy studying.

For the full article, please contact James @ <mailto:burger.james.w@gmail.com> or on [Twitter](#). ■

SOCIALLY RESPONSIVE PSYCHIATRY AND MENTAL HEALTH IN THE TIME OF COVID-19

Petrus de Vries, on behalf of the Social Responsiveness Committee recently compiled an inspiring report on the social responsiveness activities and initiatives undertaken in the department during the COVID-19 pandemic.



Despite challenging circumstances and having to shift the way we work in fundamental ways, many innovations and creative solutions have come about. Petrus highlighted the resourcefulness and resilience of the department by outlining the varied socially responsive activities, some of which are detailed below as excerpts from his report.

Psychological support was provided to a wide range of healthcare staff in hospitals and clinics, having to cope with anxieties, traumas, losses and changed and added roles and responsibilities arising from COVID-19. “At Groote Schuur Hospital Prof Jackie Hoare and her team led numerous staff support groups and activities across departments in the hospital; at Red Cross War Memorial Children’s Hospital Mr Willem de Jager, Principal Psychologist in the Division of Child & Adolescent Psychiatry, led development of individual and group psychological support to Red Cross Staff; the Lentegeur Clinical Psychology team, under the leadership of Ms Lameze Abrahams, led a similar initiative across all their staff groups, as did Dr Tessa Roos at Valkenberg Hospital.”

Practical ways to support children, families, people with disabilities, and local communities, had to be found.

“For example, the Division of Child & Adolescent Psychiatry provided food parcels and blankets to children who required emergency care during lockdown; at Groote Schuur Hospital registrars donated cell phones to inpatients without phones so that they could remain connected with their families during lockdown; the Drakenstein Child Health Study (led by Paediatrics with collaboration from the Division of Psychopharmacology & Biological Psychiatry) provided all study participants with masks, and supplied food vouchers to those in need; the Lentegeur Spring Foundation led a ‘Food Drive’ that raised over R100,000, and with additional donations of vegetables from another Spring Foundation project, the Lentegeur Market Garden was able to support more than 200 households with food hampers to support over 1,000 people in their local community. The Market Garden also established contact with a number of soup kitchens and all excess produce was made available to provide meals to the many who were struggling.”

A range of collaborative efforts were stimulated. “At Groote Schuur Hospital, for instance, the Division of Consultation Liaison formalised a partnership with Palliative Medicine to respond to bereavement and patient distress....The Division of Public Mental Health teamed up with Cape Town Together to distribute a mental health resource leaflet with information on stress management, grant information and mental health referrals; the Perinatal Mental Health Project co-founded ‘Messages4Mothers’ and created a range of resources for mothers to be distributed via multiple media outlets; ‘Chommie the Chatbot’ was created on Facebook to support adolescents experiencing mental distress. The Division of Child & Adolescent Psychiatry linked up with the International and South African Associations for Child & Adolescent Psychiatry and Allied Professions (IACAPAP and SA-ACAPAP) to produce ‘Tips for Parents and Carers in the time of COVID-19’ in an easy-read whatsapp format, translated into six South African languages; the Centre for Autism Research in Africa collaborated with Autism South Africa to lobby for bespoke lockdown accommodations for people with

autism and related disabilities. Similarly, the Division of Intellectual Disability Psychiatry worked with the UCT Inclusive Practices Unit and the Western Cape Forum for Intellectual Disabilities to lobby for and implement disability-friendly support, training, practices and legislation during national lockdown.”

Staff led or participated in research on COVID-19. “Prof Dan Stein contributed to clinical guidelines on management of OCD (Obsessive Compulsive Disorder) during the COVID-19 pandemic, and to consensus guidance about problematic internet use during the pandemic, both published in *Comprehensive Psychiatry*. Prof John Joska and colleagues from the Division of Neuropsychiatry published an article in *Aids & Behavior* on the increased risk to the mental health and safety of women living with HIV in South Africa as a result of the COVID-19 pandemic. Prof Petrus de Vries from the Division of Child & Adolescent Psychiatry co-edited with Dr David Amaral (MIND Institute, USA) a global collection of commentaries in the journal *Autism Research* on the impact of COVID-19 on autism research. In the Division of Public Mental Health the ASSET project shifted its focus to examine the impact of COVID-19 lockdown on the mental health status of perinatal women attending public healthcare clinics in Cape Town; the STRIDE project undertook a survey to determine how long-term care facilities for older people were responding to the pandemic and to lockdown”

The department went virtual for teaching, seminars, workshops and conferences. “Prof Dan Stein hosted the virtual 2020 conference of the African College of Neuropsychopharmacology (AfcNP) in his role as President of AfcNP. Dr Qhama Cossie, Head of the Division of Adult General Psychiatry at UCT and Valkenberg, was a panelist on an African Global Mental Health Institute on ‘COVID-19 and mental health care in resource-constrained settings’. Prof Katherine Sohrsdahl and the Centre for Public Mental Health arranged a webinar in collaboration with the African Mental Health Initiative on ‘mental health aspects of the COVID-19 crisis in Africa’. Prof Petrus de Vries (Division of Child & Adolescent Psychiatry) participated

in COVID-19 seminars with the Royal College of Psychiatrists (UK), with international non-profit organisations for rare diseases, and co-hosted the virtual National Autism/South African Child & Adolescent Psychiatrist and Allied Professions (SA-ACAPAP) congress in his role as President of SA-ACAPAP”.

There was a shift towards digital mental health for clinical consultation and intervention. “The Division of Psychotherapy led a range of discussions about telepsychology and telepsychiatry to prepare staff for this transition, including a webinar by Ms Nasera Cader-Mokoa, one of the senior clinical psychologists at Lentegeur Hospital. In the Division of Child & Adolescent Psychiatry, Dr John-Joe Dawson-Squibb led the creation of South African guidelines for psychiatric/psychological telehealth consultations with children, adolescents and their families, in partnership with SA-ACAPAP (South African Association for Child & Adolescent Psychiatry and Allied Professions).”

Communities were empowered through media. “Various departmental members contributed to printed media such as Daily Maverick, News24, You and Milady magazine with writings on mental health, wellbeing and self-care in the time of COVID-19. Local radio stations such as KFM, RSG and hospital radio stations used many departmental members for talks on mental health, parenting, or supporting people with disabilities during lockdown. On the Departmental Website a special section was created for COVID-19 resources. Dr John-Joe Dawson-Squibb, Senior Lecturer in the Division of Child & Adolescent Psychiatry, collated and curated relevant and freely available resources for staff, patients, families and the broader community.”

Clinical services showed resilience and creative thinking in the face of profound COVID-19 impacts. “In the Forensic Psychiatry services, a novel system for assessment had to be created at short notice.”

The contributions of staff across all divisions in the department are acknowledged and celebrated. ■

FEATURED NGO: SISTERS INCORPORATED

Gender-Based Violence – IT STARTS WITH US



Sisters Incorporated, a non-profit organisation, is a shelter founded over 60 years ago to assist women and their children who have experienced domestic violence, abuse and rape.

We provide these women with a safe and secure home environment – accommodation, food, clothing, toiletries and counselling from our resident social worker. Children that are not in school are able to attend our childcare facility. Women who come to us, are provided with training and skills to enable them to be self-sufficient when they leave.

We currently accommodate 28 women and children for 3 months at a time.

YESTERDAY has gone, TODAY it starts with us, TOMORROW we will lead from the front.

What are we trying to do at SISTERS INCORPORATED to create awareness on Gender Based Violence?

Education is key to understanding that a person who is in a dangerous environment, who is being abused, knows what they can do to get help. The first line of prevention is always to understand that it's wrong for someone to abuse you, and once you understand, you can prevent it happening to you again.

It's important to also use your Voice to create awareness of GBV. In so doing, you can connect to others and seek professional help. By talking about your experiences, one can bravely move forward into a new Tomorrow.

At Sisters Incorporated, we realise the difference we make in people's lives on a daily basis. The message we send is that whether you are a victim, a survivor, a leader or a donor, change starts with each of us.

We believe we provide a caring and protective home environment, so that survivors of GBV can get the help they need to heal, which then Empowers every woman and child to be well-equipped to walk into Tomorrow confidently.

SISTERS INCORPORATED – CARING FOR SURVIVORS OF ABUSE

Contact: 021 797 4190 / 062 532 4427 or [Email: manager@sisters.org.za](mailto:manager@sisters.org.za)

Information supplied by Delene Roberts (Manager) ■

COVID-19 THROUGH THE LENS OF INTERN CLINICAL PSYCHOLOGISTS

By Daniël Luttig



During my varsity years I was deeply intrigued by the remarkable internship stories recounted by my lecturers. Little did I know back then that after this year, we will arguably have the most interesting tales to tell.

Truly, the 2020 cohort have had the most bizarre and dystopian internship year anyone could have dreamed of! I cannot wait to hear current colleagues start off introductory lectures in 20 years with, “when I did my internship, it was the pandemic of Covid-19”.

This extraordinary year has introduced us to an abundance of new experiences, such as lockdown, zoom-bombing and telepsychology. When the government introduced the nationwide stay-at-home mandate in March, intern psychologists came to realise how different their internship experience would become in the ensuing months. Being classified as an essential healthcare worker operating on the frontlines, one felt quite important to whip out one’s fancy hospital badge and travel permit when driving to work. Those early mornings on the road were eerie and desolate, like something out of a post-apocalyptic movie; although, I really enjoyed the absence of traffic jams!

Nevertheless, the structure and routine of our secure jobs provided just that bit of comfort during a very unsettling period, which I am sincerely thankful for.

While adapting, we also improvised and overcame the barriers of physical distancing. The solution? Technology in the form of online video meetings. Most of the intern colleagues I worked with this year were Millennials, and our specialised technological skillset came in handy as we could assist our seniors to join online meetings from the comfort of their office. The tables were turned as suddenly we were doing the teaching: “ok, click that button – share screen – no, not that screen!”. I am of the opinion that Psychology as a discipline often presents itself as quite traditional with a generally aversive stance towards technology, and it seems we realised how it could be incorporated as an asset to supplement our efficacy and reach. It was a daunting experience to start a therapeutic relationship telephonically and then to continue it after lockdown restrictions eased, in-person. Aristotle famously remarked that “the whole is more than the sum of its parts” and it was subsequently strange working in therapy with masks on – patients’ faces partially obscured. I think all of us can attest how much more complicated mental status examinations became.

In some warped way it’s fitting that I am writing this piece while anxiously awaiting the results of my second Covid-19 test of the year. Look, if I have to hear the hackneyed phrase “getting used to a new normal” again, I might have to voluntarily succumb to some sort of ego disintegration. Like a flu shot which inoculates you against the virus by giving a small dose of the actual virus, our training exposed us to theoretical concepts such as “flexibility” and “trust the process” ... not to mention “self-care”.

Eventually, it appears that 2020 prodded us to integrate those ideas into our personal and professional lives. A Mindfulness approach proved invaluable: for treating others, but also as a way of self-care. We were freshly reminded that looking after ourselves is vital, whilst

supporting our patients. After all, the most important tool when entering a therapeutic space is ourselves. Frankl writes about meaning and purpose: a common experience when speaking to fellow interns was that we had to find it. My hope is that we will continue to reflect on the impact this year has had on us and our profession and consolidate the tools we acquired.

I want to thank our hospitals, clinics, supervisors, fellow multi-disciplinary team members and all frontline essential staff for walking this journey alongside us. Our hearts, thoughts and prayers go out to those who lost loved ones and who still need to continue the fight against the virus. Setjhaba sa South Afrika. ■

STUDENT PSYCHIATRY SOCIETY 2020 UPDATE

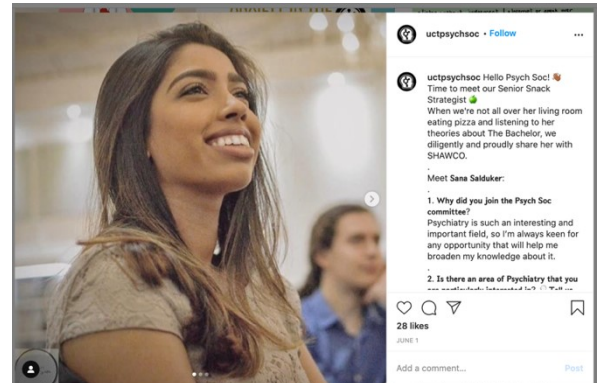
By Kristien van der Walt



The greater part of 2020 was challenging for our student-run society. However, being forced to rapidly let go of our assumptions about how academic life should work, allowed us to explore new ways of learning, and spreading interest and curiosity about psychiatry.

The society had a high-energy pre-COVID January-to-March when we hosted our Admissions in Psychiatry Series, recruited new students at a bustling (now unheard of) plaza day, and launched a Summer Reading List with book recommendations from psychiatrists.

When students were sent home in March, we took a brief hiatus as our committee members made life adjustments and adapted to online learning. Once back on our feet, we took inspiration from other student societies and used the new remote setting as an opportunity to explore new ways to execute our “vision”: to foster interest and learning in the field of psychiatry.

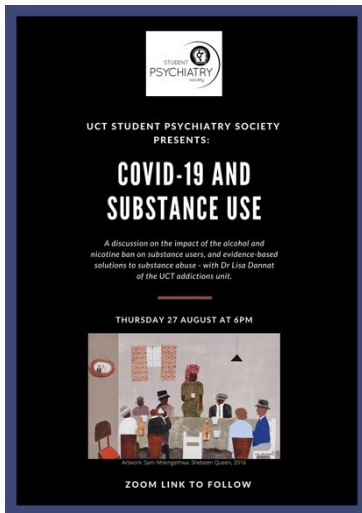


In our Introducing... social media series (Instagram, Facebook), each committee member introduced themselves via a picture and brief bio, and shared journal articles, webinars, or other interesting content in psychiatry. The result was a kind of asynchronous journal club, which allowed us to explore, critically evaluate and share psychiatry content freely available online, largely secondary to the pandemic.

In another project, we helped connect students to UCT departmental webinars they wouldn't have otherwise accessed. We were particularly thrilled to join the DCAP Friday morning academic meetings, which were previously inaccessible due to taking place off-site from our main campus. These relatively small meetings allowed us to participate in critical discussions and receive individual attention that wasn't previously possible in person.

In addition to joining the departmental webinars, we managed to host a few of our own: Anxiety in the Time of COVID, our first webinar, took place on Zoom on 23 July 2020. Dr Helena Thornton, a senior psychologist at Valkenberg, contextualised and dissected the growing anxiety we were feeling during lockdown, and provided

us with simple, practical steps we could use for ourselves, our colleagues and patients to deal with these difficult times.



Our second webinar, COVID-19 and substance use, took place on Thursday 27th August on Zoom. Dr Lisa Dannat, of the UCT addiction psychiatry unit, discussed the very topical impact of the alcohol ban on substance users, and then guided us through evidence-based solutions to alcohol misuse.

We also collaborated with fellow student society Paedsoc, to host Dr Kaveshin Naidu for a talk on Teen Mental Health on 31st July. The talk consisted of a helpful approach to common mental health conditions in teenagers, followed by a lively discussion.

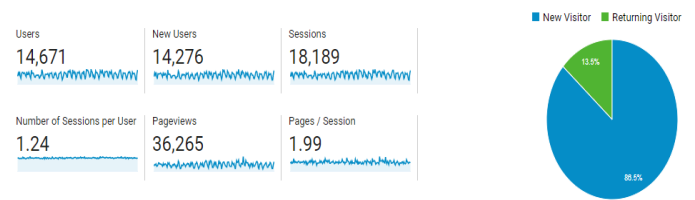
Finally, we took part in Cardiac Soc’s Faculty of Health Science Gala to raise funds for The Intensive Love and Care Project, a Grootte Schuur project that aims to help patients’ recovery from severe COVID-19 following ICU admission. The webinar event consisted of speeches from each student society, student performances and an art auction.

In October we held our annual general meeting and elected a new committee. Congrats to Jessica Andras and Ian Simon Olivier, our new chairs, and the vice-chair, Jessica Stegen.

We are grateful towards the speakers and students that got involved in psych soc despite the challenges of this last year. It was incredibly valuable to students that are interested in psychiatry to keep up these discussions and the community they create.

If you would like to get involved in the student psychiatry society, contact our new chairs at OLVIAN001@myuct.ac.za (Ian) or ANDJES003@myuct.ac.za (Jessica) ■

HOW IS OUR WEBSITE FARING?

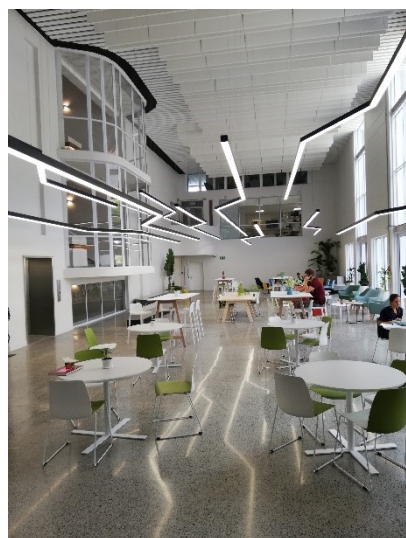


As shown in the graphics above, our website has seen mostly new visitors to the site from June to December 2020, specifically 14,276 new users. This represents an increase from the last half of 2020. A total of 14,671 users have had 18,189 sessions with a total of 36,265 page views in this period. We are pleased that the website is being accessed in this manner. If there are any queries or you would like to add/change anything to the website you are most welcome to contact [John-Joe Dawson-Squibb](#) or [Deirdre Pieterse](#). ■

MOVING INTO THE NEUROSCIENCE CENTRE

By Pieter Naudé

For the past three years our colleagues at the Department of Psychiatry and Mental Health were scattered between the Doctor's bungalows and the Outpatient building. As a result, some of us had to endure frequent excursions across campus to attend to meetings and research related activities. We are finally reunited in our renovated space, which is now nested in the Neuroscience Centre (compliments to a well-executed move). The department is still somewhat reminiscent of its original layout since the fundamental structure of the building was kept intact.



However, this is soon overshadowed by the noticeable modernization that gives the impression of a state-of-the-art neuroscience facility. The changes made to the building employ a layout that allows for natural light to filter throughout its centre to where our

offices are located. The top floor of the building has flexible workspaces and a spectacular view of Devil's Peak.

In addition to our modernized workspaces, the neuroscience centre offers many additional perks that we can utilize in our daily working activities. For example, we have access to a number of boardrooms with equipment for video conferencing and presentations to host group meetings and group video calls.



Most importantly, we are located next to the spacious atrium with a barista that will brew some of the finest coffee to accompany casual meetings. Our research facilities are once again conveniently housed under one roof with clinical testing rooms, neuroimaging facilities, and in addition, a new biobank and wet bench research laboratory that are located on the ground floor.



Above: Opening ceremony of the Neuroinstitute in March 2020

We now also share the building with other Departments and their research groups that together encompasses the Neuroscience Institute. Frequent talks in the new auditorium may cultivate new connections and collaborations between research groups and as result, lead to exciting projects and new friendships. Our new working environment has a lot to offer and with it, brings excitement for what the future holds. ■

FATIMA ISMAIL JOINS THE DEPARTMENT

By Fatima Ismail



I am a Senior Clinical Psychologist and Joint appointee to Lentegeur and UCT, replacing Siya Mkbabile. I'm responsible for overseeing the psychological wellbeing of adults with intellectual disabilities, both residential and outpatient. My background, depth and breadth in Psychology is expansive. I hold a master's degree in Clinical Psychology and am known to Lentegeur Psychiatric hospital where I completed my internship as well as community service.

I've largely worked in independent private practice over the past few years and have an extensive counselling background of working with shelters for survivors of domestic violence and other human rights organisations within the GBV sector. I previously lectured undergraduate Nursing students on Gender Based Violence as a public health issue.

I am passionate about empowering and advocating for vulnerable groups. Part of my clinical skills includes forensic work to regional courts where I was required to assess the cognitive capacity of children and adults with ID who had been sexually violated.

I have a broad range of clinical experience working with individuals and groups across the life span, among these

are working with trauma, mental health and adjustment issues. Together with a multidisciplinary team, I aim to work on strategies that allow one to process and address root causes of difficulties and build meaningful social connections. I am invested in an approach emphasizing a more integrative, dynamic, and holistic approach to mental health.

As a therapist, I have heard stories of distress and great sadness. But I have also heard stories of immense strength, courage, and triumph. I believe that therapy can take a lot of hard work and commitment, but that the work is worth the insight!

In addition to my formal education, I've worked in different non-governmental organizations, volunteered in the community particularly with youth, and have worked on various projects as a consultant.

In my spare time, I enjoy cooking and baking, events planning and being a good enough mom to my 2 children. ■

GOODBYE TO STAFF

Farewell to Dr Kirsten Reid who is based in the acute male service at Valkenberg Hospital and affiliated with the Division of General Adult Psychiatry. She is a valued member of the Social Responsiveness Committee, tasked with scheduling SR lectures and events. She will be missed by all. Kirsten will be leaving at the end of December to focus on her private practice. We wish her all the best. ■

ADHOMINEM PROMOTIONS



Jackie Hoare is Head of our Consultation-Liaison Division. She has been promoted to Professor.

Henk Temmingh is Head of our Research Committee. He has spearheaded clinical work on dual diagnosis, has contributed important research in this area, and is widely recognized for his contributions at Valkenberg Hospital, where he has mentored multiple registrars on their M Med projects, and where he has played a key role in a number of innovative projects. Henk has been promoted to Associate Professor.

Katherine Sorsdahl is Head of our Division of Public Mental Health. This Division is recognized globally for its work in a range of areas, including establishing curricula for African scholars, interventions using community health workers, and advocacy for mental health. Katt has led multiple projects within the Division, including mentorship of many postgraduate students. She has been promoted to Professor.

Zulfa Abrahams is a member of the Division of Public Mental Health, where she leads ASSET, a large and important multi-country health strengthening project. She has smoothly made the transition from undertaking research on nutrition to working in mental health. She has been promoted to Senior Lecturer. ■

CONGRATULATIONS

Congratulations to Rich Goncalves on his "pigeon pair", Oliver and Sienna who were born on 2 August 2020 and have already brought much joy!

Congratulations to Fatima Dangor on her boy Omar Ebrahim born on the 31 July 2020.

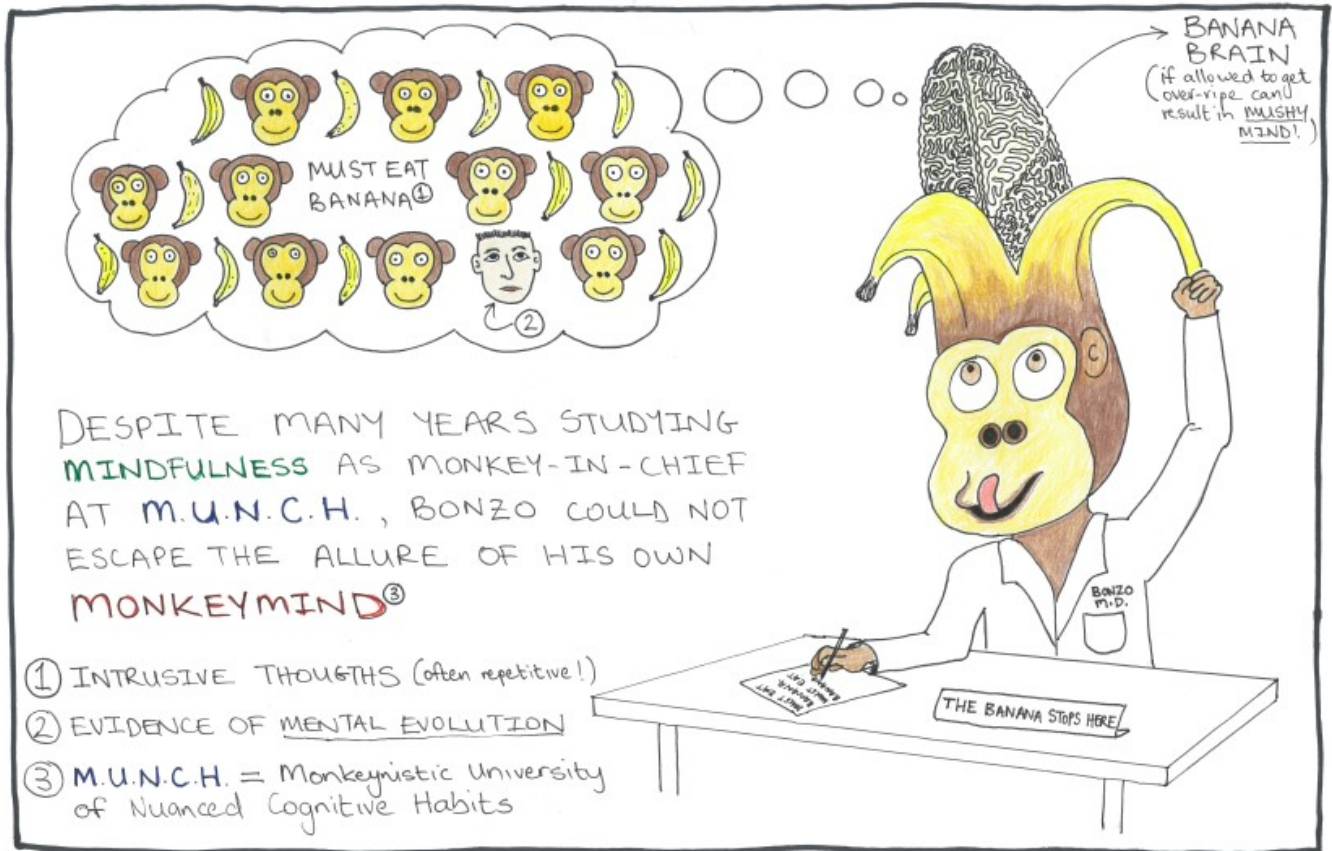
Congratulations to Lisa Dannat on the birth of her daughter who arrived on 24 November 2020. ■

THANK YOU

The editing team would like to thank Dr Jonathan Starke, previous department member, for his continued contributions to the newsletter. Lightmind has been a regular instalment of the departmental newsletter since

its inception in June 2015. We thank Joe for bringing lightheartedness, especially in a time when most need it. ■

LIGHTMIND



by Joe Starke (December 2020)