

# Mental health in the world of work amid COVID

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The Mine Medical Practitioners Association (MMPA) and Masoyise Health Programme hosted a webinar on mental health and COVID-19 in the workplace on 17 April 2021. The webinar was attended by medical professionals, union representatives and other mining industry stakeholders, and was hosted within the context of an exponential increase in the number of people living with some form of mental illness or condition. Mental health directly impacts the extent to which people can remain economically active, lead reasonably stable lives, and thrive within their families, and work and social environments.

Simphiwe Mabhele from the International Labour Organization (ILO) was the programme director and invited all to participate in the discussion about mental health and general wellbeing in the context of COVID-19. He shared insights about the ILO Guide on Managing Mental Health in the Workplace, released in May 2020, which emphasises the importance of maintaining a work/life balance.

*"Mental health... is not a destination but a process. It's about how you drive, not where you're going."* Noam Shpancer

Dr Dipalesa Mokoboto from the Department of Mineral Resources & Energy, and MMPA president, reminded everyone that the MMPA celebrated its centenary in 2020 and remains committed to its objective of bringing to the attention of its members any matter of medical and general interest in the mining industry. She stated that COVID-19 has affected us all and that the MMPA was inspired to have such a diverse panel to discuss the critical subject of mental health and COVID-19.

Zanele Matlala, Masoyise Health Programme and vice president: Minerals Council South Africa, noted that, when Masoyise iTB transformed into a comprehensive health programme, the Minerals Council did not anticipate the challenges with which the health fraternity would be faced; that the mining industry needs to be part of the solution in addressing the myths and stigma attached to mental health; and that COVID-19 has elevated the need for mental and psychological support of workers. Ms Matlala also referred to the ILO Mental Health Guide, highlighting that people working from home are exposed to psychosocial risks, such as isolation, blurred work and life boundaries, and increased risks of domestic violence.

Dr Kibachio Mwangi from the World Health Organization (WHO) Country Office: South Africa, spoke about the global impact of COVID-19 on mental health. He began his presentation with a bird's eye view of mental health conditions that are prevalent in the African region: depression is the most common condition, followed by anxiety and alcohol use disorders. The lack of access to treatment in the African region is alarmingly high, at 85%. As a multilateral institution, the WHO implemented the Mental Gap Action Programme (mhGAP), which focuses on training for the integration of mental health into primary healthcare.

Dr Mwangi further shared that the distribution of mental health services and resources in provinces remains unequal and that South Africa has no targeted and sustained public education and awareness

campaigns on mental health. This has resulted in a lack of information and deep societal stigmatisation against those who suffer from mental health conditions. Due to the lack of a mental health policy framework until recently, there was no accurate, routine collection of data on mental health service provision in the country. While the integration of mental health into primary healthcare is imbued in the Mental Health Care Act (MHCA), in practice, this is about medication management, specifically for severe mental disorders. Mental disorders such as depression and anxiety are excluded.

Dr Mwangi indicated that the WHO, as part of its country profiling work, found that knowledge and skills within the medical profession were inadequate to help capacitate healthcare workers (HCWs) to prescribe the correct medication and other psychosocial interventions. The lack of information on how mental health conditions present, where to go for help, lack of access to financial resources, and stigma were some of the barriers at personal and household levels. He noted that all these factors had contributed to the ability of the country to respond to the impact COVID-19 on mental health.

Prof. Zukiswa Zingela from Walter Sisulu University spoke about mental health and COVID-19 trends and issues by recapping the arrival of the virus in South Africa, with the first COVID-19 case confirmed in KwaZulu-Natal on 5 March 2020. On 11 March 2020, the WHO declared the outbreak of COVID-19 as a pandemic. The time lag in the spread of the virus to the African region presented a critical window of opportunity for South Africa to prepare a response and manage the imminent pandemic. She emphasised that the question that remained was if the country used the opportunity effectively.

Prof. Zingela added that the global outbreak of COVID-19, like any pandemic, triggered mental disorders. Personal reaction to such events was characterised by anxiety, fear and panic, which increased as people experienced more sickness and death, and increased the risk of adjustment disorders, acute stress disorders, post-traumatic stress disorders, depression, and substance-related disorders. COVID-19 deaths led to an increase in mental health crises, including suicide attempts and aggression and violence towards others. She stated that particular attention and interventions are needed for vulnerable groups, and that these groups need to be supported with regard to physical needs (such as food, water, shelter and basic security) and psychological needs, through easy access to support services. This is critical when dealing with self-isolation, quarantine, economic strife, displacement, and increased exposure to gender-based violence (GBV) due to the lockdown.

Prof. Zingela shared that, in South Africa, it is not possible to manage mental health by utilisation of mental health teams only. A multidisciplinary team is critical. She emphasised the need for a collaborative approach with other government departments, including Social Development and the Department of Basic Education. Public partnerships with civil society, non-governmental organisations, and faith-based organisations were important for the country to meaningfully address its mental health challenges.

Dr Tshepo Sedibe, from De Beers, spoke about mental health in

the mining sector, providing an overview of the De Beers operational environment and highlighting how a luxury goods company needs to adapt at various operational levels. He highlighted that the mining industry has always been geared to respond to risks in a structured way. The presentation highlighted that De Beers operates in very different and challenging environments in its operations across the world. These range from very low to very high temperatures, and from offshore vessel-based operations to high-tech, high-pressure factory environments. Each of these presents its own challenges during the COVID-19 era.

COVID-19 has shown that changes are needed in the work environment. Employees need to upskill and reskill, and to adapt to the smart environment and transition into the “mine of the future”. These transitions generate anxiety in the workplace and the communities in which De Beers operates, especially in regions where unemployment is an issue. Dr Sedibe highlighted that remote working triggered a sense of isolation and a new way of work had resulted in long hours

of work. Conflicting demands in the work and home environments led to an increased risk of GBV and child abuse. Anxiety, depression, and compassion fatigue were other common problems experienced.

*“This period has also shown the importance of escapism, as the workplace offers employees the opportunity to be in a different environment or to take a break from their personal lives.”*

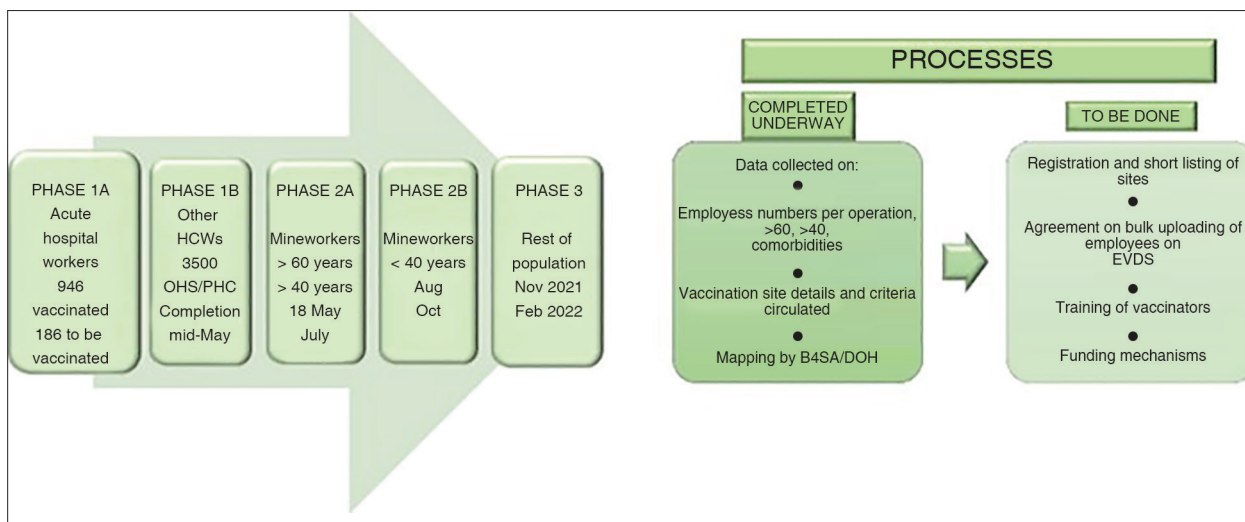
Dr Tshepo Sedibe

Dr Sedibe emphasised the need for a structured system of detection, response and mitigation, and assistance during this period. At an organisational level, De Beers had put mechanisms in place to encourage employees to seek support and help.

Safia Joseph from Life Healthcare Employee Health Solutions began her presentation on psychosocial support for employees in the era of COVID-19 by introducing Life Healthcare as an employee wellness/health solutions provider to the mining industry. She noted



**Figure 1. Impact of COVID-19 on the workplace**



**Figure 2. Mining industry vaccination rollout phases and timeline**

that elevated levels of stress and anxiety were evident as the pandemic took hold. The need to quarantine and self-isolate as people contracted COVID-19 saw an increase in levels of loneliness, depression, and harmful alcohol and drug use, as well as self-harm and suicidal behaviour. She referred to global research that indicated that quarantine, in response to pandemics in different parts of the world, had long-lasting negative psychological effects. The uncertainty that COVID-19 had brought into people's lives also triggered memories of childhood or early life traumas. She stated that employers needed to proactively manage the impact of COVID-19 as it had a direct impact on business output (as shown in Figure 1).

In conclusion, Ms Joseph highlighted that awareness creation is critical to any employee wellness programme. Closely linked to that is the texture and tone used when employees are being engaged, and consideration needs to be given to the types of platforms to which employees have access.

Dr Thuthula Balfour, from the Minerals Council South Africa, spoke about the COVID-19 vaccination update, focusing on the country's vaccination rollout programme and how the sector was preparing and interacting with it. She indicated that the Minerals Council had actively participated in all sectoral platforms that were dealing with the response to COVID-19 within the country.

*"As the Minerals Council, we believe that vaccination is the most feasible method of getting countries to resume normal economic activity and therefore encourage members and other key stakeholders to support and promote vaccination."* Dr Thuthula Balfour

Dr Balfour noted that the approval of vaccines brought much relief as it meant that there was the hope of the world returning to a 'new' normal, despite the growing concern regarding the efficacy of the approved vaccines on the new variants. The Johnson & Johnson single-dose vaccine has shown the highest efficacy on the 'South African' variant, with a 57% clinical efficacy in preventing moderate to severe cases and 85% efficacy in preventing hospitalisation and death. She added that the unfortunate delay in the vaccination procurement by the South African Government was cause for concern, but the sector remained optimistic that these issues would be resolved.

Dr Balfour informed all that, as part of the initial targeted vaccination, the sector rolled out a phased approach, as illustrated in Figure 2.

Closing remarks were provided by Adv. Hanlie van Vuuren from Solidarity, who extended appreciation to the organisers of the seminar and invited the Masoyise Programme to bring insights to the Mine Health and Safety Council so that the sector continues discussions on how to support workers on mental health issues. She suggested that the industry investigate how to deal with the feelings of guilt that most employees experienced when they returned to work after having been infected with COVID-19, or if they had exposed their colleagues to the infection. She supported the sentiment that practitioners and leaders could not provide support to workers if they did not take care of themselves during these stressful times. Mr Mabhele closed the session by thanking attendees for their patience and decorum.

The full webinar report can be accessed at:  
<https://www.mmpa.org.za/blog/>