

got problems, maybe the others can help you. The trouble is we are all new to this place. We come from different places. My home is far away, then I came here with my parents five years ago. They said we must move from our home because they say they are going to make some big farms there. I think that's why I became sick because it's not good to go to a new place.

WOMEN AND MENTAL HEALTH: A COMMENT

In the last issue of Critical Health we argued that so-called "mental illness" comes about as a consequence of the social conditions under which we are forced to live. We saw that working-class people experience poor working conditions and inadequate living standards as a result of low wages; and that this causes a great deal of mental suffering and breakdown.

The discussion with Lebowa women above shows that mental health is also a social and political issue in the poverty stricken and underdeveloped areas of South Africa. The hardship which these people suffer is on two levels: as women, and as the "forgotten people" of South Africa's bantustans.

All women experience the kind of pressures which make them prone to mental breakdowns. We must realise that this is not the result of female hormones, but is directly related to the social role and position of women in society. Women are oppressed in the home and at work. Society expects women to be passive, to repress their anger and frustration, and to bear the burden of having



and raising children in isolation. Is it any wonder that women become depressed, feel persecuted and experience mental health problems?

Of course, for women in the rural areas the position is much much worse. Life for them is a constant battle to survive, to feed themselves and their children, to scratch together some money to buy essentials. Very often they are forgotten by their men, who go to the towns, and because of their own hardships, do not send money back to help feed children. As Mrs K. points out, these conditions lead to huge frustrations and despair which are treated as "depressive psychosis" at Groothoek and other hospitals.

Why are these women given drug therapy - pills or injections - when they go for help to Groothoek after a mental breakdown? As Mrs K. says, it does not help the women to be given drugs, and then "when they are a bit calm", to be discharged. The point is that the hospital authorities (state health) do not want to recognise that social problems and poverty lead to mental suffering.

By giving women drugs to "cure" their frustrations and despair, they pretend that the problem lies inside the women themselves (for example, in "chemical imbalances" in their brains which they are supposed to have been born with). This allows the system to deny that mental ill-health is a consequence of the oppression and poverty brought about by apartheid, that the problem lies outside the women in the sick society in which they live.

There is also an element of political control in the drug therapy. If women are given injections or tablets everytime they experience anger or despair about their lives, then they will become "calm". This will mean that they will be less likely to want to change the social conditions which cause their suffering: they will be less angry about apartheid, and about the bantustans.

Fortunately, the women at Grootboek are not letting this happen. By working together, and organising themselves into support groups, they will be able to cope better with their frustrations. The important point is that they will support one another, and there will be long-term benefits for the women. As a group, they will better be able to begin to change the inadequate social conditions which oppress them.

And they will be showing the way to mental health workers! Only collective community and trade union action can change the mental suffering that poverty, poor working conditions, political harassment and the oppression of women bring about.

