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TOWARDS A STRONGER MENTAL HEALTH STRATEGY

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

Online psychotherapy concept. Male psychotherapist helping patient by video call. Woman talking to psychologist. Psychological counseling services. Therapy session. Isolated modern vector illustration

Mental health issues are a major health challenge in the world today. According to the World Health Organization (WHO), there is a 10-25-year life expectancy reduction in patients with severe mental disorders. About 72% of member states had a standalone policy or plan for mental health in 2017. India introduced the National Mental Health Policy (NMHP) in 2014, and a rights-based Mental Healthcare Act in 2017, which replaced the Mental Healthcare Act of 1987. The NMHP, National Health Mission, National Adolescent Health Programme, and Ayushman Bharat have the necessary components to address the mental health issues of all sections of the population. But more needs to be done in the context of COVID-19, which has exacerbated mental illnesses everywhere.

Studies in *The Lancet Public Health* (2019) revealed that median mental health spending across the world was around 2% of the total government health expenditure in 2015. In the case of low-income countries, it was around 0.5% of their health budget; for lower-middle-income countries, it was 1.9%; for upper-middle-income countries, 2.4%; and for high-income countries, 5.1%. There was higher allocation in developed countries than in developing countries. Government expenditure on hospitals dealing with mental health issues as a percentage of total government expenditure on mental health is 1.3% in India; in developed countries, it ranges from 3% to 15%.

In India, the share of mental hospitals per 1,00,000 population is as low as 0.01 in line with developing countries, according to the WHO. This may possibly be due to the lack of focussed attention given to mental health compared to other major diseases in India.

In the distribution of mental health units in general hospitals (per 1,00,000 population) globally, in 2016, India was ranked 114 with just 0.03 units per 1,00,000 population. India was at the 99th position in the distribution of mental health outpatient facilities (per 1,00,000 population), with 0.18 units per 1,00,000 population. India was also at the 64th position in the distribution of mental health day treatment facilities (per 1,00,000 population).

Residential mental health services, particularly community ones, are an important component for good quality mental health care. In most industrialised economies, there has been a growth of community healthcare facilities in line with the increase in patients with mental health issues. Research also shows that long-term patients with mental health issues are usually admitted to residential facilities. The distribution of community residential facilities globally for the median year 2016 showed India at the 58th position, with 0.017 units per 1,00,000 population among the WHO member countries.

The people working in the mental health sector help us understand mental health issues better. Here, India was ranked 107 with 0.292 per 1,00,000 population. Nurses, social workers and psychologists working in the mental health sector (per 1,00,000 population) in India are 0.796, 0.065, and 0.069, respectively. The leading countries in each of these three areas have 150.3, 145.4, and 222.6 per 1,00,000 population. India's ranking in this context among the WHO member countries was 97, 79 and 104, respectively.

Mental illnesses include anxiety disorders, psychotic disorders, mood disorders, substance use

disorders, personality disorders and eating disorders. The majority of suicides in the world are related to psychiatric problems or to the illnesses listed above. Death by suicide is a complex phenomenon and not fully reported. Globally, the suicide rate was 10.6 per 1,00,000 population whereas in India, it was 16.3 per 1,00,000 in 2016. The suicide rate was higher among males compared to females.

Mental health may not be the primary concern in developing economies like India as there may be other communicable and non-communicable diseases which may be more prevalent. There are also challenges regarding funding, delivery of mental health packages, lack of trained staff, etc. However, these challenges need to be considered more seriously in the wake of COVID-19 as mental health issues are widely prevalent among the Indian population due to lockdowns and related issues.

Recent reports published in *Lancet* revealed that one in seven people in India had a mental disorder ranging from mild to severe in 2017. Also, the proportional contribution of mental disorders to the total disease burden had doubled between 1990 and 2017. Mental disorders include depressive and anxiety disorders, schizophrenia and bipolar disorder. This situation was generally worse in the southern States compared to the northern States due to the nature of development, modernisation, urbanisation and other factors not understood yet. Depressive disorders were more prevalent among females than males which could be due to sexual abuse, gender discrimination, stress due to antenatal and postnatal issues and other reasons.

In order to further address mental health issues, India could reduce the treatment gap for mental disorders, increase the number of personnel in the mental health sector, work towards reducing discriminatory attitudes, and devise an integrated approach for detecting, treating, and managing patient needs. More counselling facilities, especially in rural areas, with special support for women through the provision of women doctors are needed. More telemedicine, telephone-based helpline numbers, and mental health apps could help. Communities and families have an important role in this regard and so do community-based programmes. School-based programmes on mental health can improve the mental health of children. More fund allocation for treatment of mental health, especially to those States in need of funds, could do wonders. The pandemic may be the best time to explore various policy options including creating online mental health awareness.

There needs to be a road map for mental health awareness. This should include the traditional media, government programmes, the education system, industry, and social media. Media awareness and government involvement is already happening in India but both can improve. It is high time that industry and private sector companies set up counselling facilities. The application of big data and crowd sourcing ideas may help us in informed decision-making.

Surjith Karthikeyan is an Indian Economic Service (2010) Officer. Views are personal

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To reassure Indian Muslims, the PM needs to state that the govt. will not conduct an exercise like NRC

