World Mental Health Day- 10th October 2020

World Mental Health Day (WMHD) is a program of the World Federation for Mental Health. It was first held on 10th October 1992 and is observed annually all over the world. Each year, a mental healthcare theme is chosen and for 2020 theme is ‘Mental Health for All - Greater Investment, Greater Access.’  The World Federation for Mental Health, has membership of many countries across the globe and with the help of this program, annually raises awareness within the global community about the mental health challenges, gaps and priorities through collaborative and unifying voices aimed at taking actions, addressing and creating lasting changes towards restoring the dignity of all those living with mental illness. Observation of this day provides an opportunity to gather the attention of governments, donors, policy makers and all stakeholders to ensure action for greater investment and commitment for mental health.

In the year 2014, National Mental Health Policy was launched in India. Same year, National Mental Health Survey (2014-2016) was conducted by NIMHANS, Bangalore which gave us important data.

Prevalence of Mental Illness

Total Population - 138 Crore  
Psychiatric Morbidity- 10% (13.8 Crore)   
Severe Mental Disorders-   0.8% (1 Crore)

In a vast country like India, such is the magnitude of psychiatric problem among our people. The above figure just gives the patient count. Add to it the many families who suffer in silence along with their patients. That number is huge and challenging due to the lack of adequate Mental Health Professionals (MHP) and mental healthcare facilities. This brings our attention to the question of treatment gaps. Around 15% of the mentally-ill get timely help, which reflects that majority of our population doesn't have timely access to treatment for their psychiatric ailments. When we discuss psychiatric treatment, we definitely have many issues which hinder the help seeking/treatment including ignorance and lack of awareness about psychological health aspect. Even the so called educated public shy away from seeking mental health professional help because of stigma and perceived discrimination. The awareness among other health professionals is lacking also and patients are often wrongly advised to stop psychiatric medications and are rarely referred for Psychiatric Consultation in spite of visible psychological distress. Many unexplained physical symptoms (all reports normal) can be attributed to some psychological causation/factors. Besides, there is genuine deficiency of MHPs in smaller towns and villages and thus many can't have access to specialist help. In many district hospitals, there is no regular supply of psychotropic medicine, which further hampers the management of mental illnesses.

All these factors describe the need for greater investment in the area of mental health. As practising Psychiatrists, we try to spread awareness and education regarding mental illness and treatment– one patient/ family at a time. We know many of the psychiatric illnesses are treatable and manageable with timely help. Medicines and Psychotherapy are the two main treatment arms.

National Survey on Extent and Pattern of Substance Use (2019) conducted by Ministry of Social Welfare and Justice & AIIMS , New Delhi gave an alarming figures related to the magnitude of substance use in our country.  
Alcohol use in India:   
16 Crore- Using Alcohol  
5.7 Crore- Problematic Users  
2.9 Crore- Dependant/Addiction patients

Cannabis use in India:   
3.1 Crore- Using Cannabis  
72 lakhs- Problematic Users  
25 lakhs- Dependant/Addiction patients

Opioid/Heroin use in India:   
2.3 Crore- Using Opioids  
77 Lakhs- Problematic Users  
28 Lakhs- Dependant Users

Other substances:   
10 Lakhs- Cocaine  
18 lakhs- Amphetamine group  
12 lakhs- Hallucinogens groups  
7 lakhs - Volatile substances

People might wonder why substances like alcohol and drugs statistics are given here. De-Addiction Psychiatry is a specialised branch of Psychiatry dealing with use of alcohol and other substances. Many addiction patients do not come in time for help to mental health professional. Many of them get treated for gastritis, liver or pancreas problem without addressing the root issue of substance abuse –e.g. Alcohol problem

Suicide is the silent epidemic among our young population. National Crime Records Bureau (NCRB) 2019 data reported 1, 39,123 suicide case in India. The number of attempted Suicide and Deliberate Self Harm (DSH) is twenty (20) times more for every completed suicide which is reported around 28 lakhs affected persons. All the above numbers are REPORTED but that is just the tip of the iceberg. Moreover we need to remember the loss incurred, where the whole families are deeply affected.

From an economic aspect, the World Economic Forum 2018 noted that mental health disorders are on the rise in every country and it could cost the global economy up to 16 trillion US dollars between 2010-2030, if mental health needs are not addressed. The current worldwide pandemic arose against an already dire mental health landscape that saw mental health conditions on the rise. Mental illness is on the rise in all the states including Arunachal Pradesh. Daily reports in various media speak volumes about rampant addiction; broken families and suicides are on the rise in every towns/villages. There is deficiency of specialist Doctors, hospitals, rehabilitation centres, halfway homes, old age homes, in most states.

With the available data, the Government of India came out with far reaching judgement -Mental Health Act 2017 which respects the dignity of persons and families afflicted with psychological issues and have far reaching legislation/obligations. Section 18 speaks about the RIGHT TO ACCESS MENTAL HEALTH FOR ALL. This statement talks about the access to mental health. Section 18(4) - deals with the Range of services to be made available like

a. Outpatient and inpatient services

b. Support family of person with mental illness  
c. Rehabilitation services  
d. Child and Geriatric (old age) service  
e. Free medicine (essential drugs)

Section 18(6)-Community health centres in the public health system, District Mental Health Program (DMHP). Section 18(5) F- Govt. shall make rules regarding reimbursement of costs of treatment (compensation clause for not providing services).

Such ground breaking legislation is adopted for the overall welfare of those needing mental health care. Now it is the DUTY of the concerned State Govt. to make sure they follow them in true spirit with actions in the ground. Mental health is an INVESTMENT and not expense for any community/State. If we relook at the figures one can imagine what far reaching consequences we have to pay for our future if we neglect the facts and numbers of mental illness. Imagine the lost lives (suicide), accidents and cost incurred by government/families in the treatment of addiction. With the onset of COVID-19 pandemic, harsh and drastic lockdown measures, containments still persisting, large scale socioeconomic disruption, job losses, business going bankrupt- almost everyone has experienced anxiety, depression and sleep disturbance. We still do not know what future holds for the majority in terms of long-term psychological impact. In these bleak times, we have to help each other to fight back and rebound to the good days ahead. On this day let us pledge to give our brothers and sisters and those with mental illness- the right to live with dignity. I pray that the government, policy makers and Philanthropists contribute greater investment towards mental health.

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