

BE A CHAMPION

CONCEPT NOTE

The mental health issue in India & what we aim at exploring:

The scale of mental disorders in India is staggering - accounting for nearly 15 percent of the global mental disorder burden.

The mental health burden in the country is rising due to government underfunding, forefront in the wake of the pandemic, triggered by factors such as lockdowns, economic hardships, and job insecurities recently. MH should immediately assume a crucial position in the Indian health care landscape, not only because of its magnitude and implications, but also because of its indiscriminatory reach across diverse socio-demographic profiles.

The issue is supplemented by other gaps in the ecosystem, including low capacity or MHPs with 3 psychiatrists available for 1 lakh clients requiring support, and 1 clinical psychologist & psychiatric social workers available for 1 lakh clients requiring support.

While the rapidly increasing dialogue around mental health is bringing about gradual but substantial change, it is driven by and focused on people who already have access to mental health care. In India, a substantial portion of the population still lacks access to mental health care and information about resources like available hospitals, NGOs, support groups and more. Stigma is one of the chief reasons behind this. Other significant obstacles include unequal access to mental health treatments, economic inequality, and a shortage of educated mental health practitioners.

A research study in 2018 concluded that presumptions and prejudices about mental illness are further reinforced by the usually hostile and inaccurate representations of mental health concerns in general and people with psychiatric illnesses in particular. While constant repetition and providing precise information about various elements of suicidal conduct may benefit TRPs, they may and do endanger society and should be avoided. It is important to raise awareness of these negative repercussions and to encourage sensitive reporting of concerns pertaining to mental illness in general and suicide in particular.

There is also the lack of single national level framework for all stakeholders of mental health for regulation of the profession. While clinical psychologists and rehabilitation psychologists are licensed by RCI, the upcoming NCAHP, 2021 has clubbed regulation of counseling psychologists with other unrelated professions.

Mental health in India also faces deep-rooted systemic and stakeholder-specific inequities which we aim to explore with Be A Champion Project.

Systematic inequities would include available policies, laws in places, lack of mental health professionals involved in policy making, distribution of government funding and its outcomes. And what should we next? While the budget itself is quite a fraction of required funding, there also lies an issue of budget understanding. Last year (2019-2020) the budget of ₹40 crores was allotted, from which ₹2.5 crores was used.

In India, limited financing is also an important barrier to mental health research, along with restrained research capacity, a lack of competent mental health professionals (MHPs), inadequate research training opportunities, and the government's low priority for mental health.

In the earlier sessions we can also cover the base on stigma surrounding mental health issues. As student we don't often ask what the stigma is really. We want to understand how to stigma rolls out in professional practice – where does it show, what kind of behavior does it entail, is it more among a particular community, what challenges is it bringing to MHPs? And what ways are professionals using to fighting the stigma.

We want to also educate our students in mental health literacy - the primary level information on what constitutes a mental illness, how to reach support, when to act & reach a professional and especially who to reach.

This will be carried forward by discussions on how to we can expand reach to underserved communities and promote primary diagnoses & support; ensuring workers are not overburdened, are adequately trained and incentivized sufficiently. Support structures for families and care giver of patients will also be explored along with available support groups, professionals catering to caregivers.

Our event outcomes aims at the development of viable and scalable community-based models would be essential in addressing stigma, improving psycho-social health, and facilitating re-integration of patients into society. The discussions will each batch of the Be A Champion Project would aid in the development of this goal.