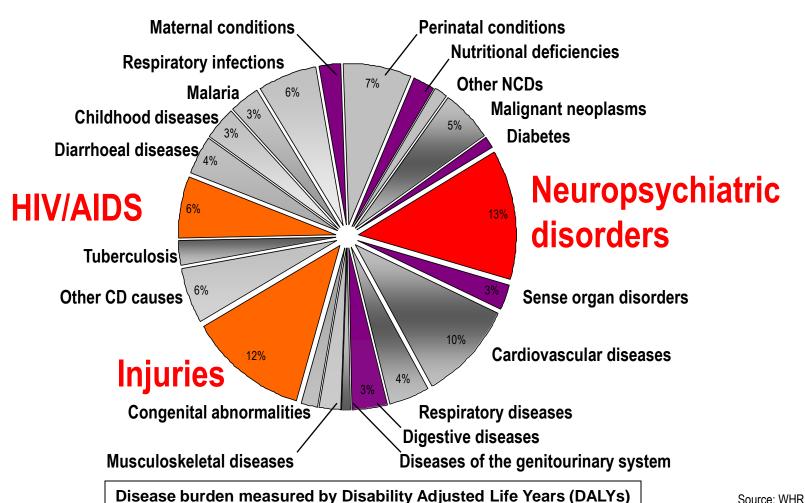
Mental Health Issues, Gaps and Needs

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MENTAL ILL HEALTH: A Large Burden

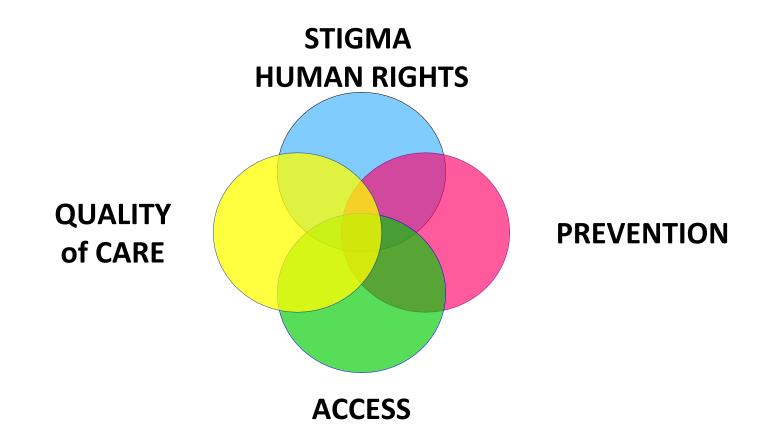




Source: WHR 2002



Gaps in Mental Health



WHO- Mental Health Action Plan 2013 – 2020

- More effective leadership and governance for mental health
- Comprehensive integrated mental health and social care services in community
- Mental health promotion and preventive activities
- Strengthened information system, evidence and research

APEG – Mental Health Report (Global health and mental health)

- Mental illnesses are killer diseases. They need to take their place among other killer diseases for investment and priority.
- People with mental illnesses have short life, poor health & poor livings. Risk of suicide and domestic violence is high.
- Treatment for mental disorders are as cost effective as those for other disease like diabetes.

Major Milestones of Modern Mental Health Service

- 1961 AD: Psychiatric OPD in Bir hospital
 Kathmandu by first psychiatrist Dr. B P Sharma
- 1965: 5-bedded Psy. inpatient unit in Bir hosptal
- 1972: Psy. services in Army hospital Kathmandu by second psychiatrist Dr DRB Kunwar
- 1983/84: Non-governmental organizations started work in mental retardation & drug abuse

Major Milestones of Modern Mental Health Service (contd.)

- 1984: Psy. Dept. of Bir hospital was separated to create a Mental hospital (first and the only one mental hospital in the country)
- 1986: Psychiatric OPD in the first medical college hospital in Kathmandu (TUTH). After a year inpatient service also started.
- 1987: Psychiatric services outside Kathmandu valley started in Pokhara in a Regional hospital (General referral hospital)

Prevalence of Mental Disorders (estimated)

•	Psychosis	1-2%
•	Neurosis of all kinds	10%
•	Depression	4-6%
•	Epilepsy*	1%
•	Mental retardation**	3-5%
•	Alcohol use disorders	3-5%
•	Drug use disorders	0.5%
•	Others (PTSD, psychogeriatics etc)	1.00%

^{*}Neurological disorder ** Developmental disorder & not a mental illness

Mental Health Service Status in Nepal

- Mental Hospital and 10 (Teaching + other)
 hospitals provide Psychiatric services in
 Kathmandu.
- Several NGO's have rehab. Centers for drug/alcohol problems, Mental disorders* and for mentally challenged** children.
- Outside Kathmandu valley: 14 centers (general hospitals & Teaching Hospital Psy. Dept in major cities) provide psy. Services. No service in other cities & rural areas
- Koshis, Ashadeep etc ** not a mental illness

Mental Health Service Status in the Country (contd.)

- Proper mental health service includes diagnosis
 of mental disorders, drug treatment,
 counselling, psychotherapy, occupational
 therapy and rehabilitation programme. It also
 includes free treatment for poor patients. There
 is large gap when these issues are considered.
- Western method of management may need modification based on culture, belief system, family support, distance and economic conditions

NATIONAL MENTAL HEALTH POLICY, 1996

Four broad objectives:

- Policy I: To ensure the availability and accessibility of minimum mental health services for all the population of Nepal.
- Policy II: To prepare human resources in mental health.
- Policy III: To protect the fundamental human rights of the mentally ill.
- Policy IV: To improve awareness about mental health, mental disorders and healthy life styles
- This policy was updated by Mental Hospital with WHO Consultant's support and agreed by most of the psychiatrists in 2005.

Mental Health Legislation

- No separate mental health legislation
- The Civil Law has legal provisions in some of its sections, but they are inadequate.
- First draft of Mental health Legislation was prepared in the year2000 A.D, which was revised / rewritten in 2007. This second draft has been revised in recent years.

Human Resource Development in Mental Health

- Mental hospital and 4 Medical institutes have Psychiatry MD residency programmes and yearly 7-8 psychiatrists are added in the mainstream. However psychiatrists working under the MOH are limited, less than 15?
- Total beds for psychiatric inpatients are about 250 in Kathmandu and about 150 outside valley (includes Mental hospital, teaching hospitals and private hospitals)

Recent Developments in Mental Health... OPD Data – Morbidity-3 (HMIS)

- ICD Code: F03 Dementia, F10 Addiction to alcohol or drug, F20 schizophrenia, F29 Psychosis, F31 Bipolar disorder and F32 Depression'
- F40 Phobic Anxiety, F41 Other Anxiety, F42
 Obsessive-compulsive disorder, F44
 Conversion disorder and F48 Neurosis
- F79 Mental Retardation*, G40 Epilepsy*, G43
 Migraine* and F99 Mental Disorders

Recent Developments in Mental Health (cont.)

- Primary Health Care Revitalization
 Department has included Standard Treatment
 Protocol (STP) for Psychosis, Depression and
 Epilepsy.
- Training Manuals for mental health training has been developed by DOHS MD, CMC-N and Mental hospital.

Mental Health in Health Policy 2014

- In Paper looks very good. It talks about:
 Human Rights of all citizens in quality health service in prevention, treatment and rehabilitation.
- Basic health service free and universal coverage. Telemedicine all over the country
- Mental health service right from community to specialized hospital
- Increase investments for physically and mentally disabled

Man power currently available

Psychiatrists**

Child psychiatrist*

Clinical psychologists*
 6 (?)

Psychiatric nurses * 12

Psychiatric social workers
 Nil

Occupational therapist* Nil

^{*}There are no known posts in Govt. hospitals

^{**} Under MOH about 10 are working.

Major Issues

- National Mental Health Policy has not been seen as an essential component of the National Health Policy.
- There is no separate focal point for mental health in the Ministry of Health / Department of Health.
- Mental health service is not integrated in primary health care. Psychotropic drugs are not considered as essential drugs.
- Training / awareness activities not enough

Way Forward

- Political commitment to improve the mental health service. Increase national spending in mental health care
- Implement National Mental Health Policy fully. Bring Mental Health Legislation.
- Reduce stigma of mental disorders by awareness raising programmes. Posting of psychiatrist in all govt. referral hospitals.
- Create post of clinical psychologist where psychiatric services are available.

Way Forward....

- Start treatment and rehabilitation centre for abandoned chronic psychotic patients seen in the streets / prisons
- Encourage the activities of International and National non-governmental organizations working in the field of mental health
- Develop Mental Hospital as National Psychiatric Hospital with all the sub-specialities and facilities
- Develop National Alcohol Policy as Alcohol use disorder is a major public health problem.

