Comment

Mental health in India: evolving strategies, initiatives, and prospects

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Mental, neurological, and substance use disorders account for over 10% of the global disease burden, but about 85% of individuals in low-income and middleincome countries lack access to treatment.1 The WHO Special Initiative for Mental Health (2019-2023) was introduced to explore the strategies to strengthen mental health systems in nine such countries. A mid-term review of this WHO Special Initiative was conducted against the backdrop of the COVID-19 pandemic and its increased demand for mental health services, which identified three areas of strategic action: a) political prioritisation to improve mental health policy and increase funding for health systems transformation; b) developing a sustainable model of mental healthcare, and c) promoting a collaborative and contextualised approach for change.^{2,3} These findings create an opportunity to inspect the mental healthcare scene in India. Post-COVID-19, India requires unified efforts from all stakeholders to attain the Sustainable Development Goals by 2030, especially Goal 3, focusing on mental health. This goal calls for universal health coverage, access to quality mental healthcare services and affordable essential medicines.

In India, the overall prevalence of common mental disorders (CMDs), encompassing depressive and anxiety disorders, was 5.1% in the 2016 National Mental Health Survey, with a treatment gap of 80.4%.4 Persons with mental health issues face many challenges while reaching out to mental health services. These challenges are compounded among people from marginalised populations or hard-to-reach areas, leading to inconsistent usage of these services. The consequent treatment gap can be attributed to the unequal distribution of mental health resources and the variable implementation of mental health policies.4,5 Over the past decade, the Government of India has taken many measures to address these shortcomings and ensure equitable distribution of mental health services. The National Mental Health Policy (NMHPolicy), introduced in 2014, alongside the Mental Healthcare Act (MHCA) of 2017, outlines

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strategies for improving mental health and safeguarding individuals' rights. The NMHPolicy focuses on providing comprehensive care, spanning outpatient to community-based services.⁶ It suggests a higher resource allocation in making services more accessible and its integration into general healthcare. It also emphasised the role of research, such as national surveys, to guide policy planning and execution.⁶

Programmes for mental health in India are proactively evolving to meet current needs. The National Mental Health Programme (NMHP), with the District Mental Health Programme (DMHP) serving as its functional extension, are India's mainstay of mental healthcare services. The DMHP oversees the mental healthcare delivery of the entire district and trains medical officers on mental healthcare. The initial evaluation of the impact of the DMHP showed partial success; its activities were limited to promoting mental health awareness, providing essential care, and ensuring access to essential psychotropic medications.6 However, since 2015, the DMHP's coverage has expanded to encompass more than 90 per cent of the revenue districts in India.6 In further efforts to effectively scale up mental health services (under NMHP), steps are underway to integrate them with the broader health services under the National Health Mission to ensure coordinated planning and fund allocation. Building on research inputs, mental health programmes have expanded their scope to include essential areas like child and adolescent mental health and suicide prevention. The Government of India has introduced three initiatives recently to enhance the reach, affordability and engagement of the mental health services in the community. The Ayushman Bharat initiative transforms primary healthcare facilities into health and wellness centres (HWCs) with provisions to screen mental ailments.7 Second, the Pradhan Mantri Jan Arogya Yojana (PM-JAY) is a government-funded health insurance/ assurance scheme covering India's poor and vulnerable populations and providing financial protection for their hospitalisations.7 The third initiative, the Ayushman Bharat Digital Mission (ABDM), with digital health records, looks forward to ensuring care continuity besides stimulating research.8

Community participation in mental healthcare is a pivotal strategy in India, particularly as care-seeking is influenced by traditional beliefs and practices.⁹ The





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involvement of community experts and stakeholders is becoming increasingly frequent in making a policy. The MHCA formed collaboratively, will strengthen the active participation of community experts and stakeholders in further progress at both policy and service levels. Similar stakeholder involvement for designing better mental healthcare delivery models must be done for other areas like adolescent mental health.¹⁰

Reflecting on the WHO Special Initiative for Mental Health, India's efforts, as seen through the NMHP, DMHP, and other innovative initiatives, exhibit a progressive direction towards addressing mental health concerns. A proactive, collaborative, and researchinformed approach, with an emphasis on community engagement and policy-driven reforms, is crucial to ensuring that mental healthcare becomes universally accessible and effective.

Contributors

S.S. was responsible for the conceptualisation of the manuscript, and he reviewed and edited the draft. P.M. contributed to writing the draft of the article, and its content.

Declaration of interests

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