



## The right to mental health

***This article is related to Paper-II (Governance, Health)***

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***"A new report shows how rising mental ill health is causing mounting disabilities, early deaths and fuelling cycles of poverty."***

The term “mental health” has become a euphemism for “mental illness”. This is in stark contrast to what it should be, for mental health is the most valued asset we have, the most treasured aspect of our humanity. This is precisely why, when people are asked to compare different health conditions, mental health problems are ranked as the ones they fear the most. This is not surprising, for we rely on the diverse capabilities our mental health underpins to successfully learn and master the skills that make our lives meaningful and worthwhile. So, one would expect that mental health would be the most prioritised of all issues facing the world. Sadly, that is quite far from reality.

Today, the medical journal, Lancet, publishes a report by its Commission on Global Mental Health. The report was launched on Tuesday at the first ministerial on global mental health, hosted by the UK government in London. It not only documents that mental ill health is on the rise worldwide, but that this increase is causing massive amount of disability, early deaths and fuelling cycles of poverty. Most people with mental health problems do not receive care, which prolongs suffering and leads to colossal societal and economic losses. Even worse, they are often subjected to human rights abuses and discrimination. Perhaps no other cause of suffering has been so profoundly neglected.

The situation in India is on par with amongst the worst country-level mental health indicators in the world. In India, suicide is now the leading cause of death of young people, alcohol use is blatantly promoted by commercial interests and its abuse has been relegated to a moral issue to be addressed by primitive, punitive policies rather than through a public health approach, tens of thousands of people with severe mental health problems languish in horrific conditions in mental hospitals or on the streets and appalling deprivations — from under-nutrition to neglect — that affect the development of the brain in childhood remain unchecked. There are virtually no community-based mental health services in the country.

The Sustainable Development Goals (SDGs) represent an exponential advance from the Millennium Development Goals, with a substantially broader agenda that affects all nations and requires co-ordinated global actions. The specific references to mental health and substance use as targets within the health goal reflects this transformative vision.



To help achieve these targets and, indeed, the SDGs themselves, the Commission outlines a comprehensive blueprint for action. It has three unique guiding principles. One, our approach to mental health must cover its full spectrum, from day-to-day wellness to long-term, disabling conditions. We know how to promote mental health, prevent mental disorders and enable recovery. It's time to use this knowledge to benefit entire populations. Two, mental health is the product of psychosocial, environmental, biological and genetic factors interacting with neurodevelopmental processes, especially in the first two decades of our lives. Because our experiences in childhood and adolescence shape our mental health for life, it is crucial that these years unfold in nurturing environments, which promote mental health and prevent mental disorders. Three, mental health should be respected as a fundamental right by putting people living with mental health problems at the centre of planning services. Everyone is entitled to dignity, autonomy, care in the community and freedom from discrimination.

Achieving these aspirations will require several actions. First, mental health services must be scaled up as an essential component of universal health coverage. Second, barriers and threats to mental health, such as the pervasive impact of stigma, must be assertively addressed. Third, mental health must be protected by public policies and developmental efforts led by the country's top leadership. This endeavour should involve a wide range of stakeholders within and beyond health. Fourth, new opportunities must be enthusiastically embraced, in particular those offered by the innovative use of community health workers and digital technologies to deliver a range of mental health interventions. Fifth, substantial additional investments must be urgently made as the economic and health case for increased investments in mental health is strong. There is also an immediate opportunity for more efficient use of existing resources, for example, through the redistribution of budgets from large hospitals to district hospitals and community-based local services. Finally, investments in research and innovation must harness diverse disciplines to advance understanding of the causes of mental disorders and develop more effective interventions to prevent and treat them.

Mental health is a global public good. Our reframing of mental health is aligned with the central principle to "leave no one behind" and to the contemporary notions of human capabilities and capital. We believe both in the inherent right of every person to mental health, and that mental health is a means of facilitating sustainable socio-economic development, more complete health, and a more equitable world.

Urgent action to fully implement our recommendations will not only hasten the attainment of the health SDG, but indeed many of the other SDGs as well. While diverse legislation and programmes, from the Rashtriya Bal Swasthya Karyakram to the Mental Health Care Act, provide a robust policy foundation for realising these aspirations in India, we need to ensure that these are implemented. For this, we will need a genuine partnership of a diverse range of groups — from the mental health and development communities to policy makers and civil society — coming together to transform mental health across the country.



## Mental Health Care Act, 2017

### Context

- The Rights of Persons with Disabilities and its Alternative Protocol were adopted by the United Nations in December 2006, which came into effect on May 3, 2008.
- India had approved this announcement on October 1, 2007.
- As a signatory to this, the 'Mental Health Care Act, 2017' was brought by India to safeguard the rights of mentally ill persons.

### Main point

- On April 7, 2017, the President approved the 'Mental Health Care Act, 2017' and this Act came into force on this day.
- This Act replaces the Mental Health Act, 1987.

### The main provisions of this Act are as follows:

- All persons will have the right to take advantage of the services of mental health treatment care of the government funded or operated by the government.
- The mentally ill person will have the right to give advance directives in respect of the methods of treatment and to nominate a representative who decides for himself in the state of instability.

- The service provider or the therapist can not be held liable for any side-effects resulting from the treatment in a pre-directed manner.
- The concerned governments have been empowered to establish the National Mental Health Authority at the national level and State Mental Health Authority at the state level.

### These authorities will have the following functions:

- Supervision and registration of all mental health institutions.
- Development of standards of quality services for these institutions.
- Preparation of register of mental health practitioners.
- Training the enforcement officers and the psychiatrists according to the provisions of this Act.
- Accepting complaints against shortage / inadequacy in providing services.
- Advising the government on issues related to mental health.

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**Expected Questions (Pre Examination)**

**1. Consider the following statements-**

1. Patient with mental disease can determine the nature of the diagnosis.
2. Doctors are obliged to diagnose as per the directions determined by the patients.

Which of the above statements is/ are correct?

- (a) Only 1
- (b) Only 2
- (c) Both 1 and 2
- (d) Neither 1 nor 2

**2. Consider the following statements regarding the Global Mental Health Report-**

1. Global Mental Health Report is released by the World Health Organisation.
2. Disability, immature death and poverty is continuously increasing due to mental diseases.
3. India has the lowest rank on the basis of mental health indices.

Which of the above statements is/ are incorrect?

- (a) 1 and 2
- (b) Only 1
- (c) 1 and 3
- (d) All of the above

**Note :**

The answer of the pre-examination (expected questions) on 9 Oct is 1(d), 2(b) and 3(c).

**Expected Questions (Mains Examination)**

- Q. "Due to mental disease has been neglected in India on public and personal level, it is marching towards a crisis which will have severe harmful effects." To what extent do you agree with this statement. (250 Words)**