

# NATIONAL AND COMMUNITY MENTAL HEALTH PROGRAM



# **NATIONAL MENTAL HEALTH PROGRAM**

The Govt of India integrated mental health with other health services at rural level. It is being implemented since 1982 and Maharashtra was the first state to implement NMHP.

# AIMS OF NCMHP

- To ensure treatment and prevention of mental and neurological disorder.
- Use of mental health technology
- Application of mental health principles in total national development to improve quality of life.





# OBJECTIVES

- To ensure availability and accessibility of minimum mental health care for all in the foreseeable future, particularly to the most vulnerable and under privileged sections of population.
- To encourage application of mental health knowledge in general health care and in the social development.
- To promote community participation in mental health services development , and to stimulate efforts towards self help in the community.

# STRATEGIES

- Integration of mental health with primary health care through the national mental health program.
- Provision of tertiary care institutions for treatment of mental disorders.
- Eradication stigmatization of mentally ill patients and protecting their rights through regulatory institutions like the central mental health authority, and state mental health.

# APPROACHES



- Intergration of the mental health care services with the existing general health services.
- To utilize the existing infrastructure of health services and also to deliver the minimum mental health care services.
- To provide appropriate task oriented training to the existing health staff.
- To link mental health services with the existing community development program.

# DISTRICT MENTAL HEALTH PROGRAMME COMPONENTS

- Training programs of all workers in the mental health team at the identified institution
- Public education
- Early detection and treatment
- Providing valuable data and experience at the level of community .



Counselor Education

# COMPONENTS OF PROGRAM

## ■ TREATMENT SUB PROGRAM

- village and sub center (MPW, HS, MO)
- Primary health center (MPW, HS, MO)
- District hospital ( Psychiatrist, 30-50 beds)
- Mental hospital and teaching psychiatric units. ( Specialty)



## ■ REHABILITATION SUB PROGRAM ( epileptics and psychotics at CL & Rehabilitation centers at DL & HRC)

## ■ PREVENTION SUB PROGRAM (Community Based-addictions, juvenile, suicidal problems)



# MENTAL HEALTH SERVICES IN INDIA

- In 1946 Bhole committee
- Muddaliar health committee
- General hospital psychiatric units.
- Community care approach.



# EXTENT OF THE PROBLEM AND FACILITIES AVAILABLE IN INDIA.

## ■ MANPOWER AVAILABLE

Psychiatrist	-2500
qualified doctors	-240,000
clinical psychologist	-600-700
psychiatric social worker	-500-600
psychiatric nurse	-600
pG center	-48

- National mental health policy
- Mental health act
- Mental health health act 1987
- Post mental health services
- Present status of mental health services.
- Future of mental health services.
- School mental health programme.
- Community care in mental health.
- Trust areas of NMHP
- Creating awareness and reducing stigma.

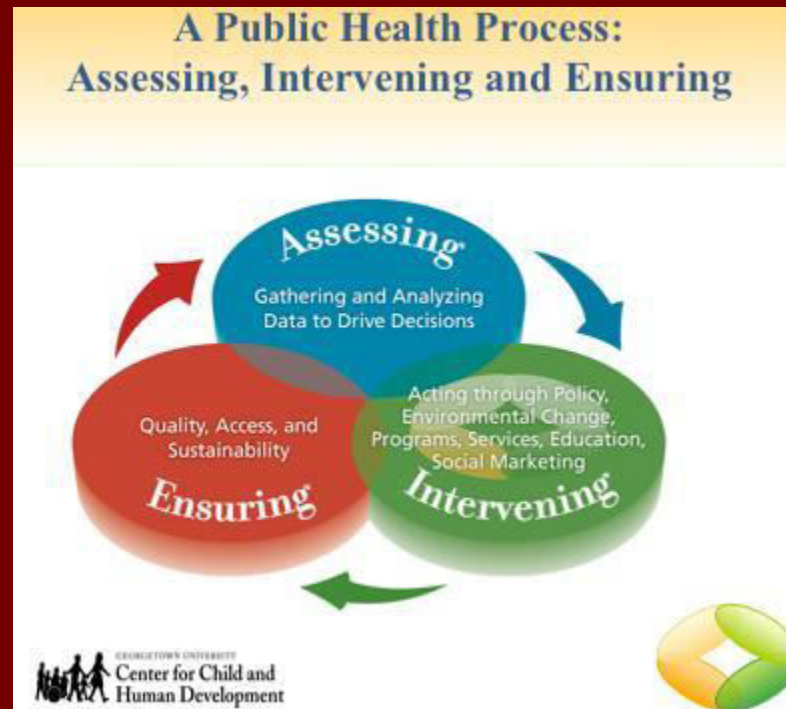


# FIVE YEAR PLANS



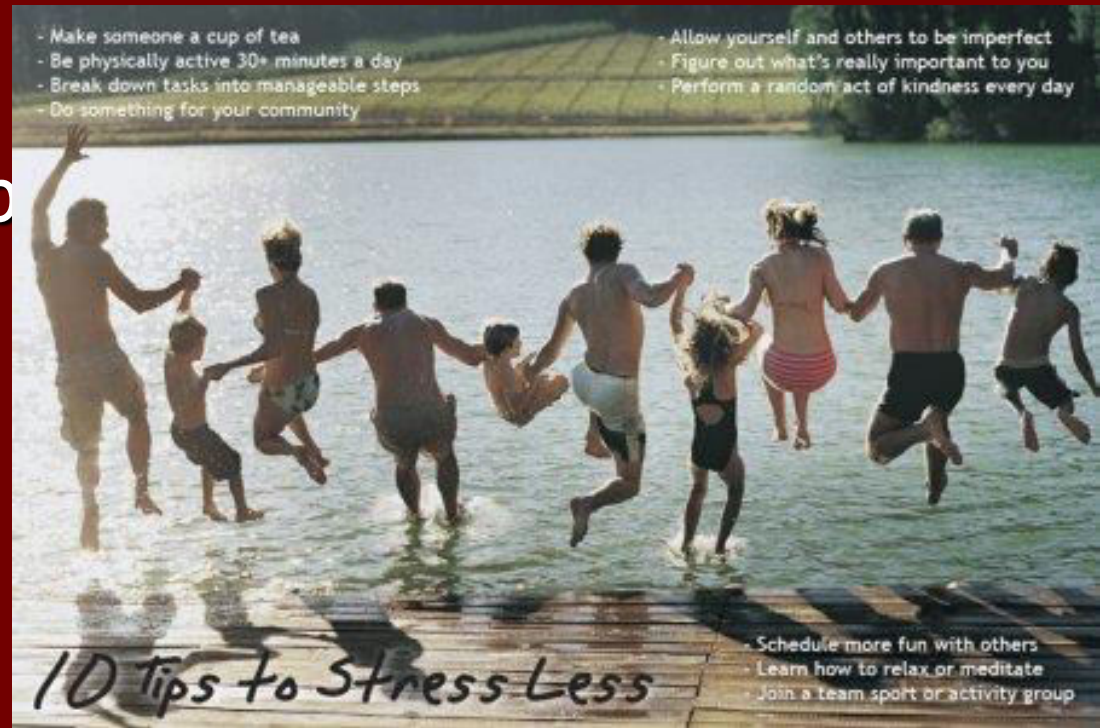


# REVISED NATIONAL MENTAL HEALTH PROGRAMME



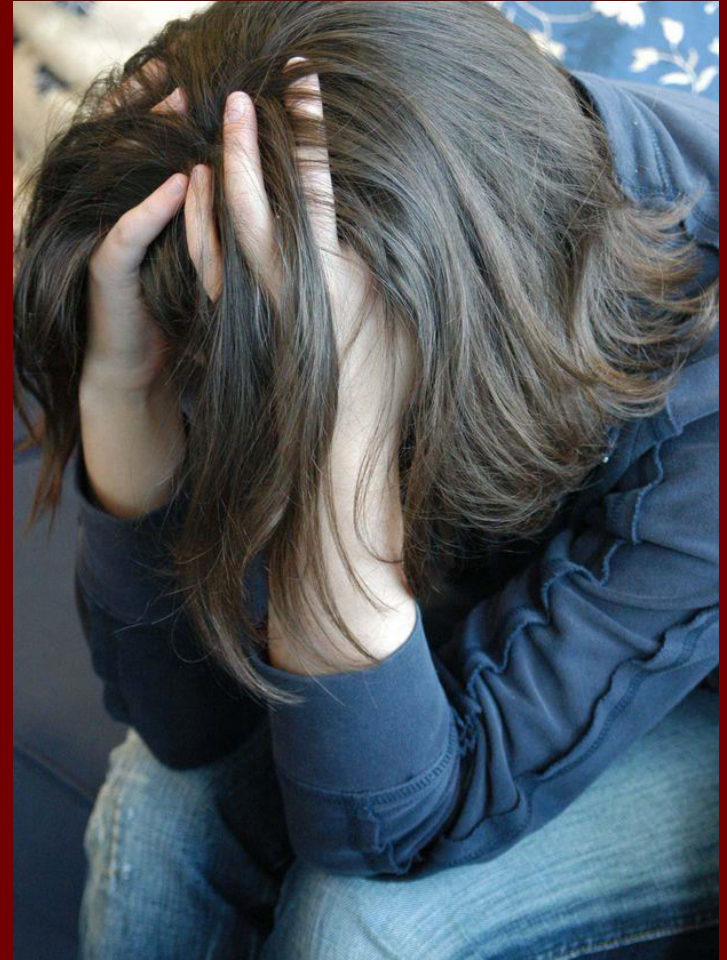
# COMMUNITY FACILITY FOR MENTALLY ILL

- Day hospital\centres.
- Half way homes.
- Group homes.
- Foster homes.
- Sheltered workshop
- Mental health emergency care.
- Walk in clinic.
- Home visit.
- Self help group.



# APPROACHES TO COMMUNITY HEALTH

- Primary prevention
- Secondary prevention
- Tertiary prevention



# ROLE OF COMMUNITY HEALTH NURSE IN MENTAL HEALTH

- Assessment of family
- Assessment of community
- Planning and implementation
- Family interventions
- Community interventions
- Evaluation





# CHANGING FOCUS OF CARE





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