Comprehending the Challenges faced by Mental Health Experts and NGO's in India

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ABSTRACT

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Mental illness is one of our greatest worldwide challenges because it is the primary cause of disability. The size of the issue in India, a country with a diverse and rich culture, can seem daunting. Only 0.75 psychiatrists are available to treat every 100,000 patients in the world's second-most populous country, and the WHO estimates that the cost of mental illness would cost the global economy $1.03 trillion between 2012 and 2030. From 2022 to 2028, the India Mental Health Market is anticipated to expand at a significant CAGR of 15%. Studies indicate that India is becoming more aware of the reality and effects of mental health while responding with acceptance and openness, highlighting the importance of access and education. This mind-set, however, requires systemic backing. The aim of this exploratory quantitative research study is to get an overview of some challenges faced by experts and NGOs' in the Mental Health and wellness space.

Keywords: Mental wellness, Mental health, NGOs, challenges

Introduction

The reduction of persistent stigma, the improvement of the treatment and research capacity of the mental health system, the implementation of prevention programmes to lessen the incidence of mental disorders, and the establishment of sustainable scale-up public health systems to improve access to mental health treatment using evidence-based interventions are identified as the four priority areas for concentrated attention.

In the modern era, mental and drug use problems are the main contributors to disability worldwide. The fact that more than 70% of people who require mental health services do not have access to care globally is a contributing factor to the established global burden of disease linked to mental disorders. Ironically, this gap exists at a time when research has shown that evidence-based therapies for mental health are successful in settings with constrained resources. The efficacy and effectiveness of both psycho-pharmacological treatment and evidence-based psychotherapies for treating mental disorders have been shown in trials carried out in low- and middle-income countries (LMICs). The economic value of preventing and treating mental problems in these contexts is also being progressively highlighted by studies on the cost-effectiveness of mental health therapies. To improve mental health globally, the World Health Organization (WHO) established the Mental Health Gap Action Programme Intervention Guide (mhGAP-IG) through a comprehensive evaluation of the available research and an international participatory consultative process to assist close the global mental health (GMH) treatment gap.

There is compelling evidence that the lack of understanding about mental disease, as well as prejudice and discrimination against those who have mental illnesses, are factors that delay or prevent treatment for mental illnesses. As was seen above, there are still major obstacles to overcome in order to bridge the gap in mental health treatment and make considerable progress toward improving mental health internationally.

Mental disease stigma fuels a vicious circle of suffering and secrecy that results in recurrent rounds of stigma and discrimination, making it one of the biggest obstacles to closing the global treatment gap for mental illness. Low rehabilitation results and a poor quality of life are caused by social isolation, which is based on stigma. Numerous people are discouraged by stigma from getting treatment for mental illnesses when they are still in the early stages. Delays in seeking care due to stigma worsen the prognosis and support the myth that mental diseases

are incurable. A widespread, pervasive stigma may also lower the status accorded to the mental health professions, deterring young people from choosing these specialties and worsening the labour crisis.

Literature Review

From 2022 to 2028, the India Mental Health Market is anticipated to expand at a significant CAGR of 15%. According to a 2017 Indian Council of Medical Research (ICMR) report, nearly one in seven persons suffer from mental disorders of varying severity in India. Depression and anxiety disorders were the most prevalent, affecting 45.7 million and 44.9 million people, respectively. Research shows nearly 19.7 crore people suffered from some form of mental disorder, including depression, anxiety disorders, schizophrenia, bipolar disorders, idiopathic developmental intellectual disability, conduct disorders and autism.(Dutta, Dec 2019).

The need for mental health care services is high. More than 13% of the global burden of disease is due to neuropsychiatric disorders, and almost three-quarters of this burden lies in low- and middle-income countries (LMICs). Neuropsychiatric disorders include mental disorders (such as unipolar and bipolar affective disorders, substance use and alcohol use disorders, schizophrenia, and dementia) and neurological disorders (such as epilepsy, migraine, multiple sclerosis, and Parkinson disease). We include both these types of disorders in our broad definition of global mental health. The burden of these disorders is projected to grow dramatically in the next decade, in part because of the demographic and epidemiological transitions in LMICs. However, between 76% and 84% of people with serious mental disorders (as defined by the World Health Organization [WHO] Composite International Diagnostic Instrument) in six LMICs in the World Mental Health Survey had not received treatment in the previous year, representing a considerable treatment gap. Where treatments are accessed, they often lack a clear evidence base and involve considerable out-of-pocket payments, which can lead to catastrophic health expenditures. Budgets and human resources provided by ministries of health (MoH) for mental health care remain woefully inadequate to address the treatment gap, particularly in LMICs (Lund, Tomlinson et al 2012).

There is a growing body of evidence testifying to both the efficacy of specific treatments for priority mental disorders in LMICs and their cost-effectiveness. This evidence has informed the policies of the WHO Mental Health Gap Action Programme (mhGAP), with its objective of scaling up services for mental, neurological, and substance use disorders. Alongside mhGAP, others have developed innovative intervention models, such as maternal mental health services in the context of routine maternal care, livelihoods interventions for people with severe mental illness, and mental health interventions in complex emergencies.

Research Methodology

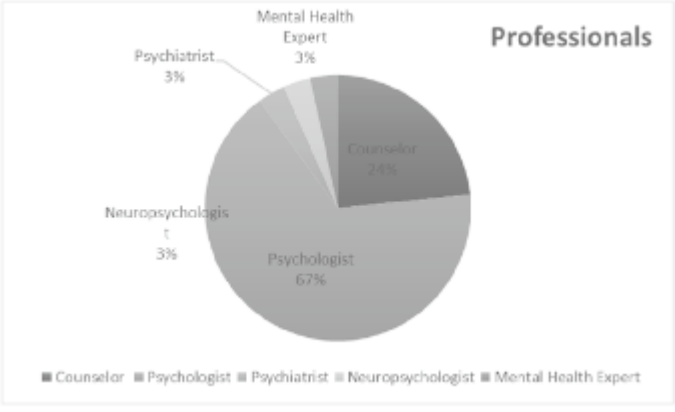
This research was undertaken primarily to understand some of the challenges faced by mental professionals and NGO's in the mental health and wellness space. Exploratory research is defined as a research used to investigate a problem which is not clearly defined. This research was conducted to have a better understanding of the existing problems.

A questionnaire was circulated to almost 100 to collect data from the predefined group of respondents (mental health professionals and NGO's in the mental health space). Sample size of 100 was targeted; however we received complete replies from 60 respondents. The quantitative data is presented as pie charts and bar graphs for clarity.

The literature review gave an overview of current knowledge on the research topic which allowed insights into current trends, opinions and the existing research in this domain.

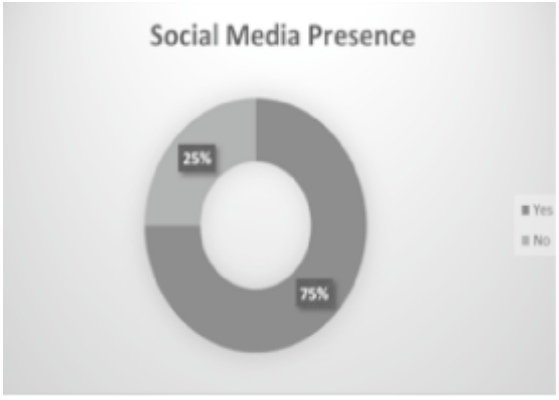
Data Analysis

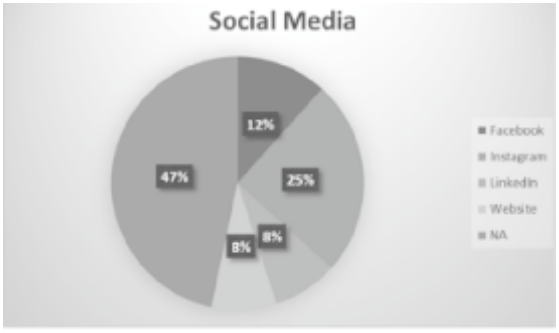
A. Professionals

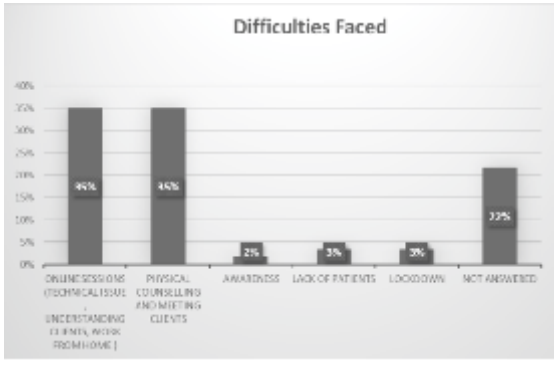


In research carried out, mostly responses recorded were from psychologists followed by counsellors. Also, responses were gathered from mental health experts, psychiatrists and neuropsychologists.

75 % of those professionals were active on social media, while some others choose not to be on social media at all. Most professionals prefer Instagram as a platform to showcase their profession and competence



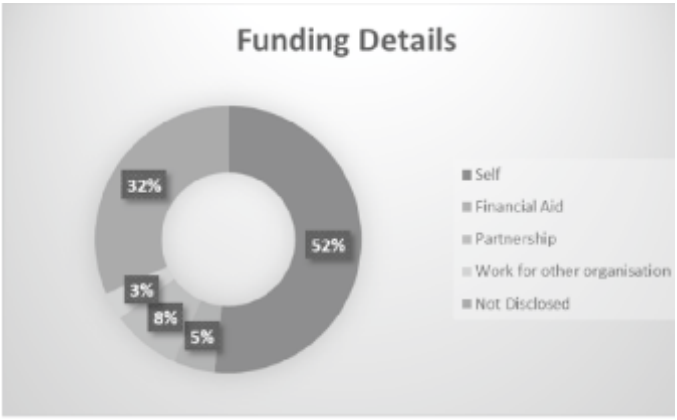




As per the data, the most common difficulties faced were online session and lack of physical counselling. Professionals believe that online sessions were not as effective as physical counselling. They found it difficult to understand patient's issues and could not connect properly with the patients. The other difficulties faced were awareness among patients, lockdown and lack of patients due to unawareness.

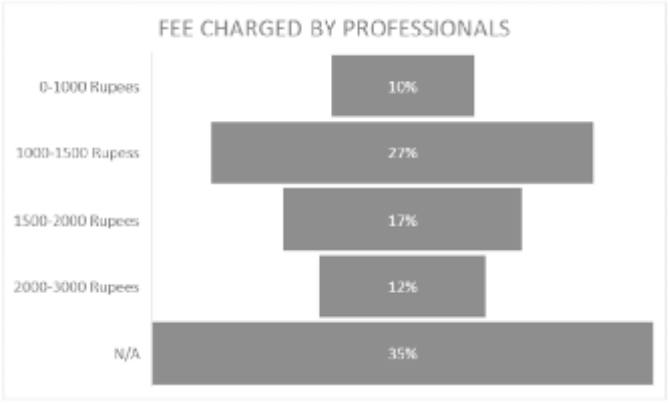
Considering above data, to tackle the issues faced, professionals undertook and found some solutions on it. Awareness campaigns were undertaken to create awareness among patients and to address the importance of taking mental health issues seriously. Also, to make people aware about professionals who are working on mental health.

They tried to create online sessions more effective by upgrading and using better technology.

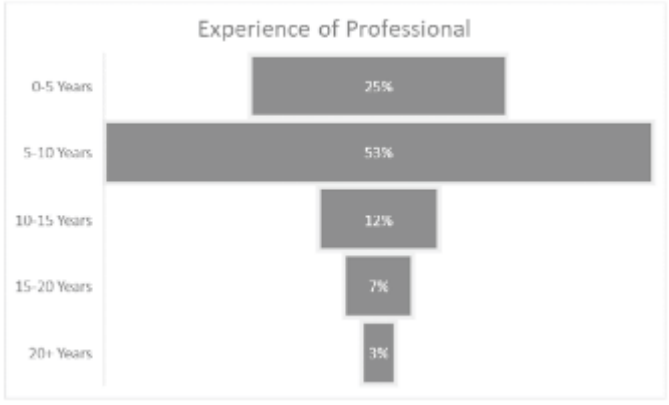


Above 50% self-funded their organisation. Also, some received financial aid, got into partnership. Some professionals choose to work for other organisations too.

The Strategies for marketing were mostly focused on digital marketing and advertising The Strategies for marketing were mostly focused on digital marketing and advertising through various channels. Online marketing gave an opportunity to address public at large. Other marketing strategies included conducting campaigns for spreading awareness.



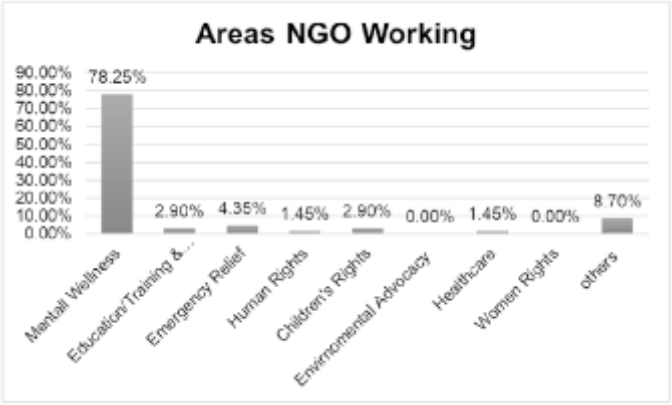
As we see the highest percent of fee charged is in the range of 1000-1500 Rupee and the most percent of people do not disclose their fee charges.



Professional with experience of 5-10 years were 53% followed by 25% with 0-5 years' experience. There were very less professionals having experience of more than 10 years.

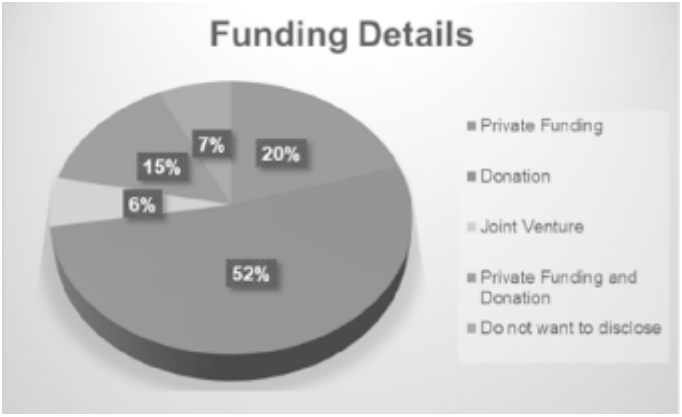
As the USP of professional with the highest percent of 25% says they have Expertise knowledge and after that 21.67% says their Experience is the USP with that 20% said using different techniques is their USP after that followed by Counselling, Clinical Specialist, Dealing in sensitive areas and others respectively.

B. NGO

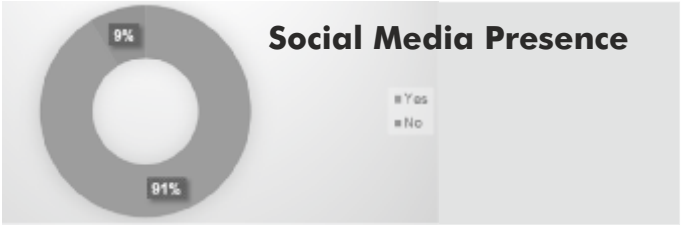


As from the survey we get majority of responses from NGOs who are working on mental wellness ares with 78.25% share of the responses. And remaining is break out between Eduacation training and development, Emergency relief, Human rights, Children rights, Helath care and others.

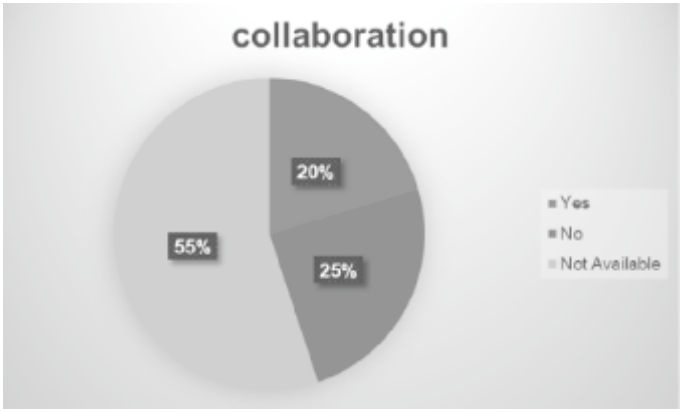
Majority of funding comes from donations followed by private funding from organizations.



Above 90% of NGOs are active on social media to create awareness and help people with their mental health issues.



Nowadays, majority of marketing is done through social media and digital marketing. Campaigns and seminars are run by NGOs for their Market and creating awareness. Word of mouth is also believed to be a source of marketing for NGOs.



20% of NGOs collaborate with hospitals and mental health professionals for working on mental health and solving issues.

Conclusion

According to a 2017 Indian Council of Medical Research (ICMR) report, nearly one in seven persons suffer from mental disorders of varying severity in India. Depression and anxiety disorders were the most prevalent, affecting 45.7 million and 44.9 million people, respectively.Even though mental health is now taken an epidemic proportion the attention given to this health domain seems scant. The number of professionals opting for mental health is not significant and hence there is a huge gap between demand and supply. Education and awareness regarding mental health problems and their treatment must also be extensive. The lack of access to necessary medications, which is particularly common in underdeveloped nations like ours, severely limits the ability to treat psychological problems, policies governing mental health care, access restrictions, and the cost of such services and mental health being ignored in almost all health policies is a major deterrent

Qualitative insights from discussions with professionals highlighted the following issues;

- Mental health has historically received less attention from state and central health planners, and this is evident in both the quantity and calibre of mental health services in India.
- Stigma, stigmatisation, and insufficient mental health care are common barriers to obtaining care.
- The lack of access to necessary medications, which is particularly common in underdeveloped nations, severely limits the ability to treat psychological problems. Policies governing mental health care, access restrictions, and the cost of such services.
- The paucity of mental health care specialists in low- and middle-income nations like India exacerbates this issue.
- The availability of community-based mental health treatment programmes is particularly uncommon in low-income nations.
- Additionally, many countries' insurance plans do not cover psychiatric problems, making mental health care pricey for many people.

A prominent and credible business report suggests; from 2022 to 2028, the India Mental Health Market is anticipated to expand at a significant CAGR of 15%.and hence its extremely important to pay attention to this domain as an expert or even as a budding sector of growth and opportunities.

NGO's in the Mental Health and Wellness space require adequate representation, training, support and funding through government initiatives as well as public private partnership

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