



Introduction to Mental Health and Mental Disorders For CHO/SN





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REFER TO TRAINING MANUAL ON ‘MENTAL, NEUROLOGICAL AND SUBSTANCE USE (MNS) DISORDERS’ FOR CHO/SN



MODULE	CHAPTER NO.	TITLE	P No
Community Health Officers module on MNS Care	Chapter 1	Introduction to Mental health and Mental health disorders	
Staff Nurse module on MNS Care	Chapter 1	Introduction to Mental health and Mental health disorders	



TARGET AUDIENCE

- Community Health Workers
- Primary Care Doctors
- RMP
- Nurses
- Pharmacist





LEARNING OBJECTIVES

To develop understanding about

- Mental Health and Mental well-being.
- Various components influencing the Mental Health.
- Understanding Mental illness.
- Common symptoms and types of mental disorders.
- Causes and factors affecting Mental Health.





HEALTH



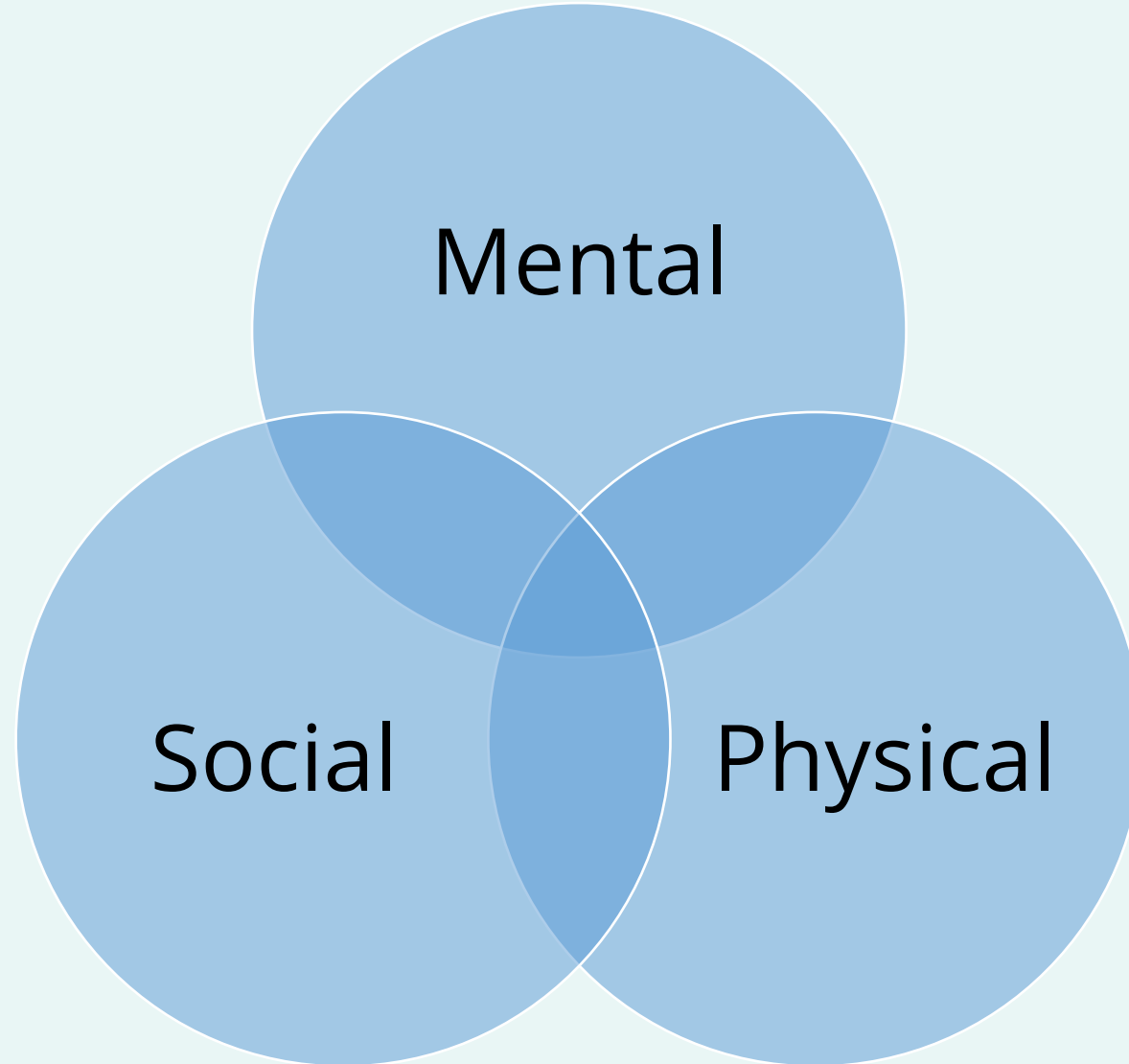
“A state of complete

- Physical,
- Mental and
- Social well-being and
- Not merely the absence of disease or infirmity.” (WHO)





A STATE OF COMPLETE





HEALTH

‘There can be no physical health without mental health’

World Health Organisation





MENTAL WELL-BEING



Mental well-being of an individual implies that an individual is able to:

- Realize his or her own potentials,
- Cope with the normal stresses of life,
- Work productively and fruitfully, and
- Make a contribution to her or his community.





COMPONENTS INFLUENCING THE MENTAL HEALTH

- Resilience
- Self-esteem
- Emotional well-being
- Spiritual well-being
- Social connectedness





CHAINED MENTALLY ILL

- Church/Durgha/Temple



- In a religious rehabilitation center





- At home





WANDERING MENTALLY ILL

- On street





SIGNS AND SYMPTOMS

Insomnia	Heart beat / Anxiety / Sadness
Decreased appetite	Body Image disturbance
Weakness / fatigue	Poor learning skills
Multiple somatic complaints	Academic decline
Numbness – Paresthesia	Decreased Concentration
Long standing head ache	Decreased Memory
Alcohol / Tobacco abuse	Drugs Abuse
Crying spells	Inferiority complex
Death wishes / Suicidal Ideas	Negative Emotions





SEVERE SYMPTOMS

- Suspiciousness
- Referential thinking
- Abnormal Behavior
- Talking to self/laughing
- Violence
- Self Neglect – Personal hygiene
- Disturbed Biological functions
- Disturbed Occupational function
- Disturbed Social function





COMMON SYMPTOMS OF MENTAL DISORDERS



DOMAINS

1. Physical symptoms
2. Psychological symptoms
3. Thinking symptoms
4. Behavioural symptoms
5. Imagining symptoms





Caution:

- It should be understood that not all persons with mental illnesses will show signs.
- Just showing one of the symptoms does NOT mean that the person has mental illness.



1. PHYSICAL SYMPTOMS

Involve the physical functioning

- Multiple body aches / somatic complaints
- Longstanding head ache
- Easy fatigue / tiredness

2. PSYCHOLOGICAL SYMPTOMS

Involve the mental functioning

- Fearfulness
- Feeling sad / anger / irritable
- Anxiousness
- Anger
- Frustration



3. THINKING SYMPTOMS

These involve those that affect the way a person thinks

- Decreased attention and Concentration
- Decreased memory



4. BEHAVIOURAL SYMPTOMS

These include those that affect the way people act or what they do

- Singing
- Dancing
- Violence
- Talking to self
- Laughing to self
- Withdrawn
- Deliberate self harm



5. IMAGINING SYMPTOMS

These include those that involve the person perceiving or experiencing things that are not actually real.

- Hallucination – auditory / visual



TYPES OF MENTAL DISORDERS

1. Common Mental Disorders
2. Severe Mental Disorders
3. Child and Adolescent Mental Health Disorders
4. Neurological conditions
5. Substance Use Disorder
6. Suicide ideation/behaviours





CHALLENGES IN MENTAL ILLNESS

Laboratory test - Normal	Stigma
Normal Imaging studies (Ct Scan/MRI)	Discrimination
Invisible disease / disability	Non-availability of treatment
Absent insight	Affecting the family members
Difficult quantify	Impacting the community at large

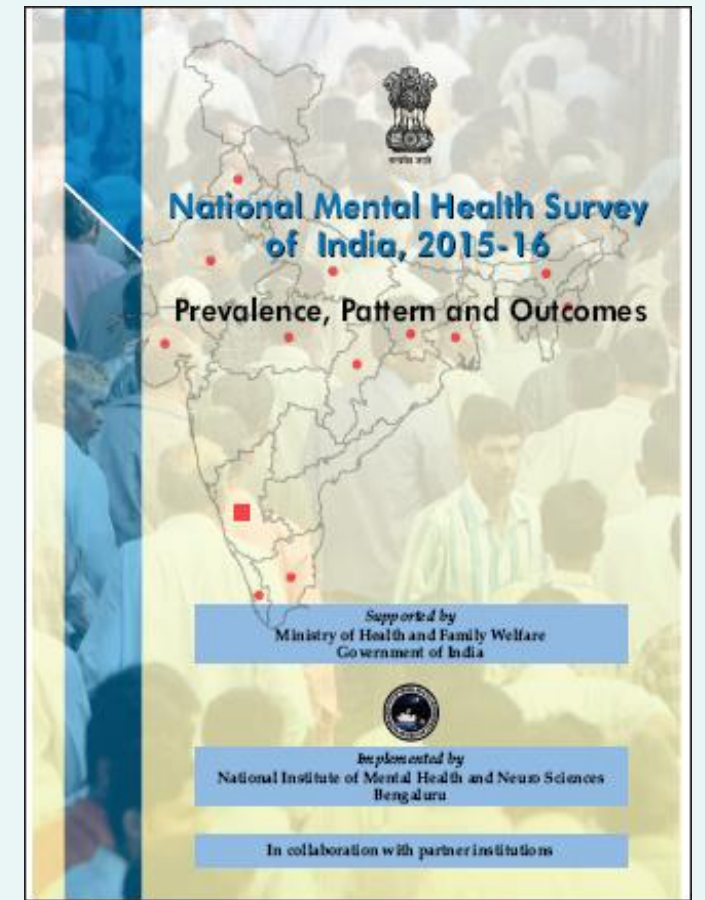




NATIONAL MENTAL HEALTH SURVEY 2015-16

Defining the Problem

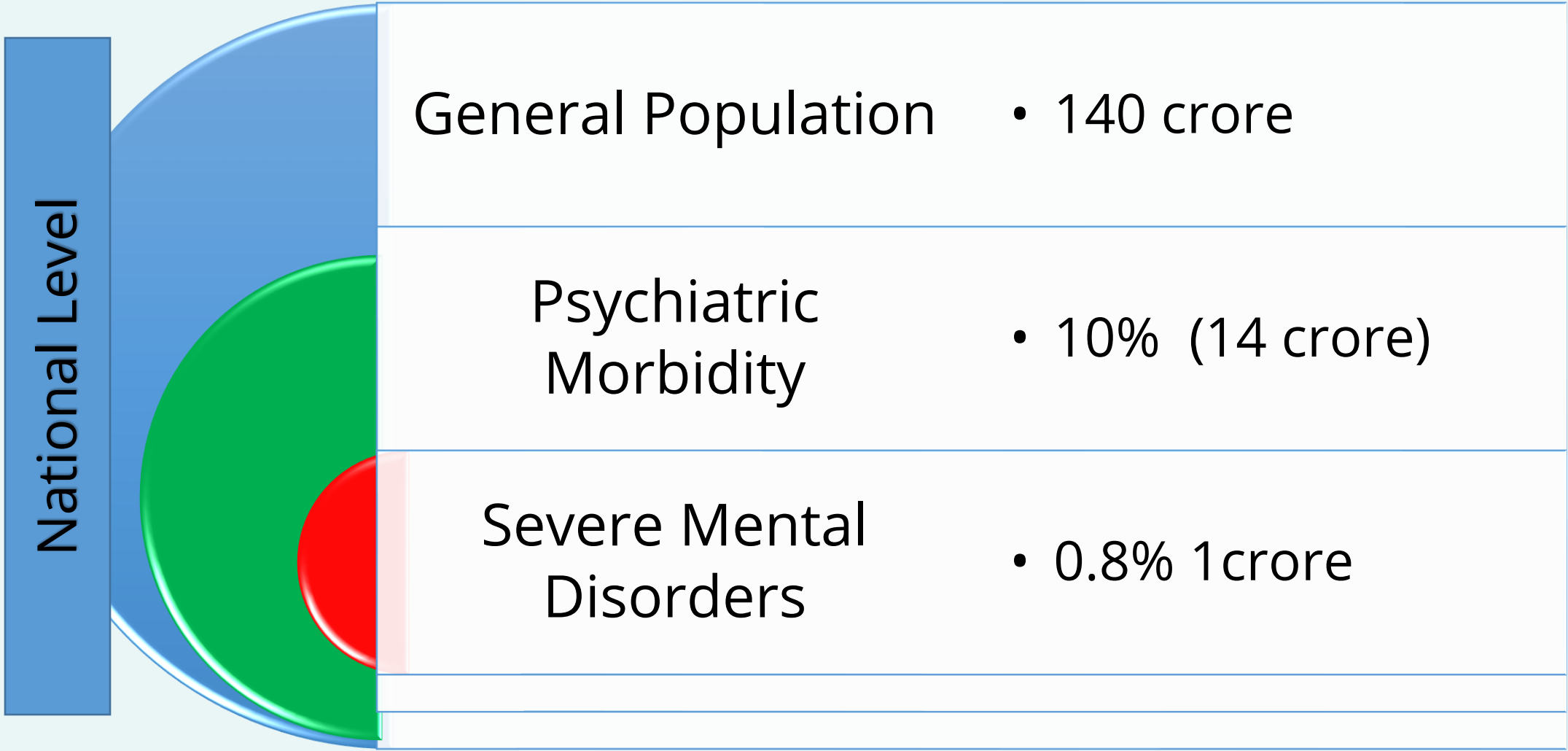
- 39,532 individuals across 720 clusters from 80 taluks in 43 districts of the 12 selected states
- Psychiatric morbidity is 13.7% lifetime and 10.6% current mental morbidity
- Severe mental disorders is 0.8%



2015 - 2016



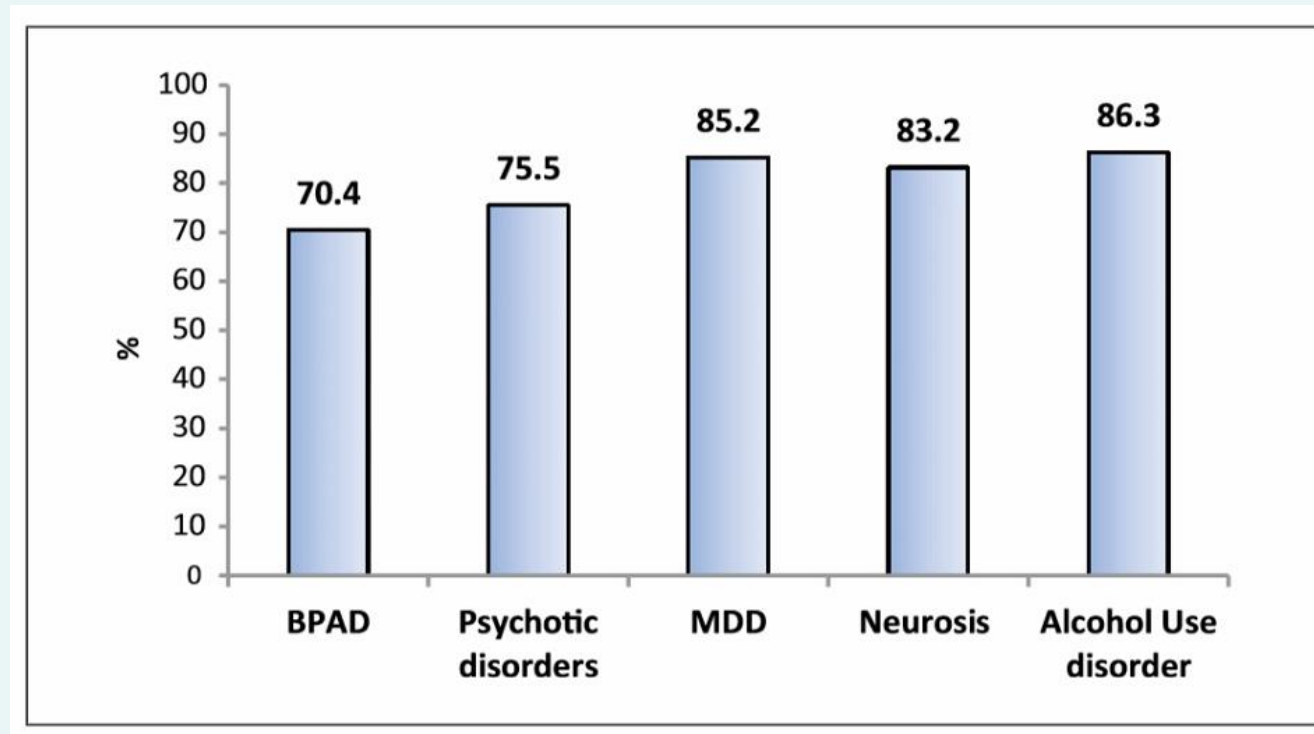
PREVALENCE OF MENTAL ILLNESS





TREATMENT GAP

- Treatment gap for mental disorders ranged between **70% and 86%** for different disorders



The percentage of people with mental illness not on treatment



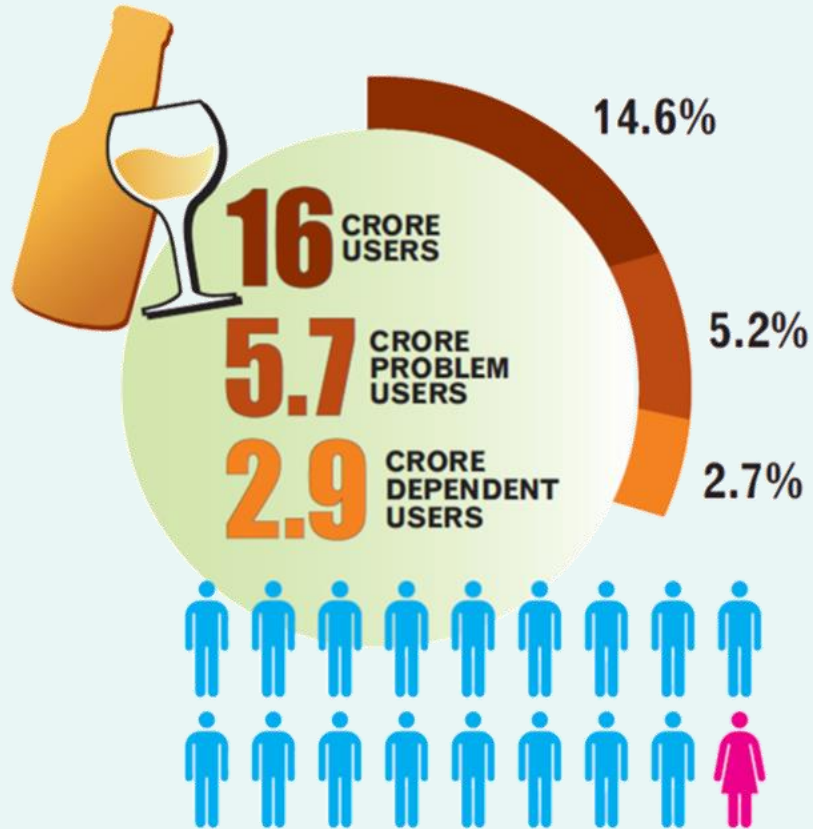
NATIONAL SURVEY ON EXTENT AND PATTERN OF SUBSTANCE USE IN INDIA 2019

- The Ministry of Social Justice and Empowerment (MoSJE), Government of India Commissioned the study
- 2,00,111 Household Survey was done in 186 districts of the country and a total of 4,73,569 individuals were assessed



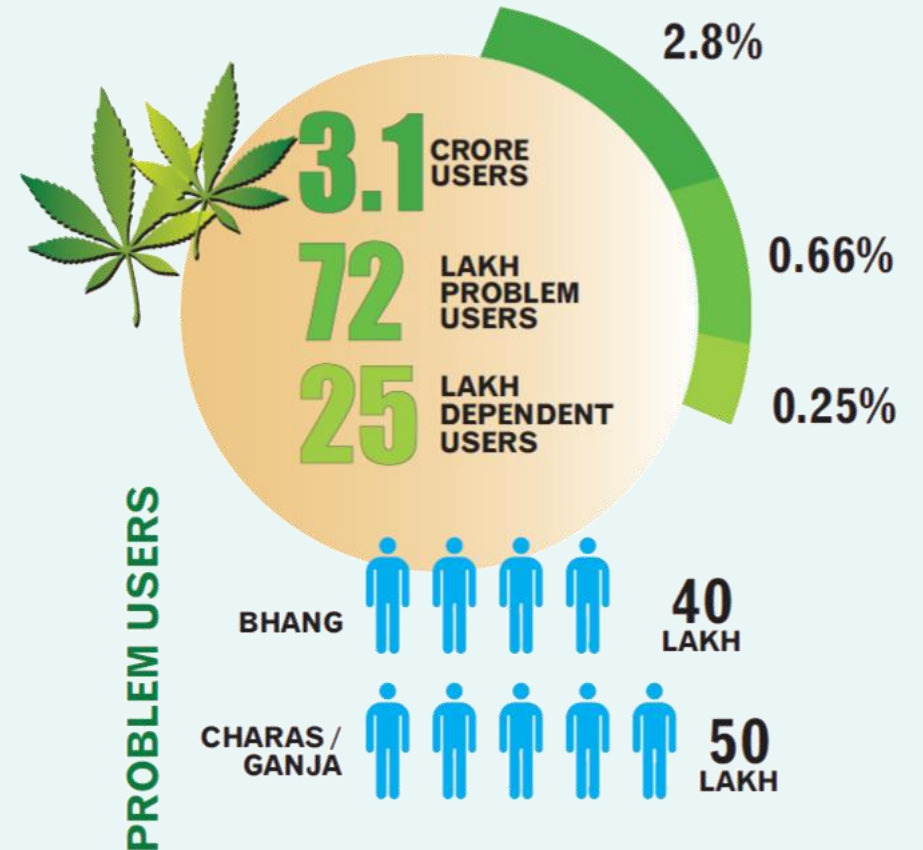
SUBSTANCE USE

Alcohol Use in India



National - 2.9 crore is dependent on alcohol

Cannabis Use in India

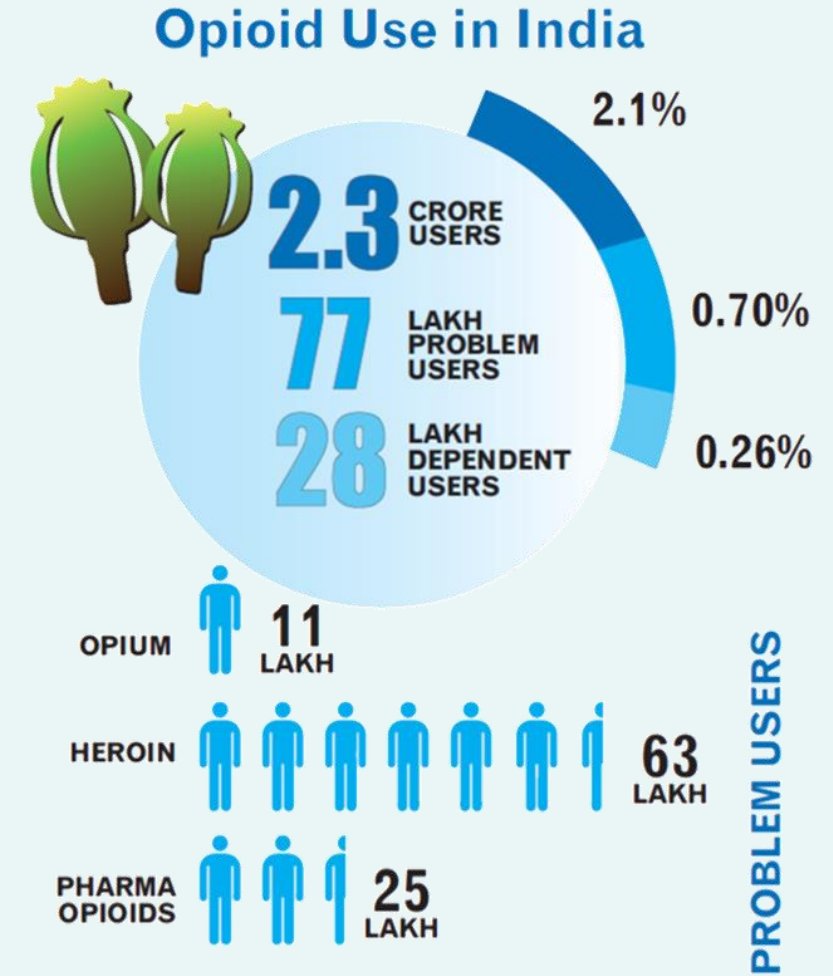


National - 25 lakh is dependent on cannabis



SUBSTANCE USE

- 28 lakh is dependent on Opioid
- 10 Lakh - Cocaine
- 18 Lakh - Amphetamine
- 12 Lakh - Hallucinogens
- 7 Lakh - Inhalants in children





DEATH BY SUICIDE IN INDIA

- A total of **1,39,123 deaths by suicide** were reported during 2019
- Everyday there are ~381 deaths by suicide
- Every hour there are ~16 deaths by suicide
- Approximately for every **225 seconds** there will be one death by suicide

-National Crime Records Bureau (NCRB) - 2019





STUDENTS DEATH BY SUICIDE

Year	Number of students committed suicide per year
2016	9478
2017	9905
2018	10159
2019	10334

Everyday ~28 students commit suicide





ATTEMPTED SUICIDE

- For every death by suicide there will be at least 20 attempted suicide cases. (World Health Organization 2019)
- 1.4 lakh completed suicide **X 20 = approximately 28 lakh people attempt suicide every year**

- World Health Organization 2019



Chronic Medical Illness

30 to 50% comorbid
mental illness

At Primary Care Centre

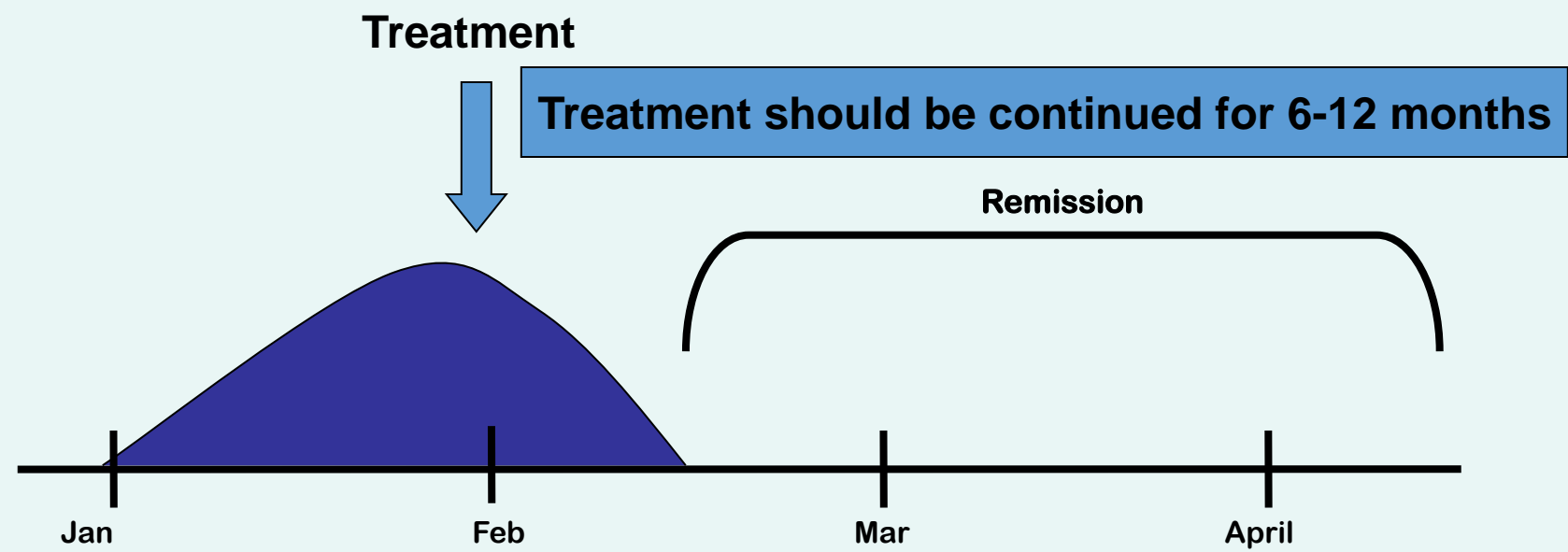
20 to 30% have mental
illness at every primary
care centre





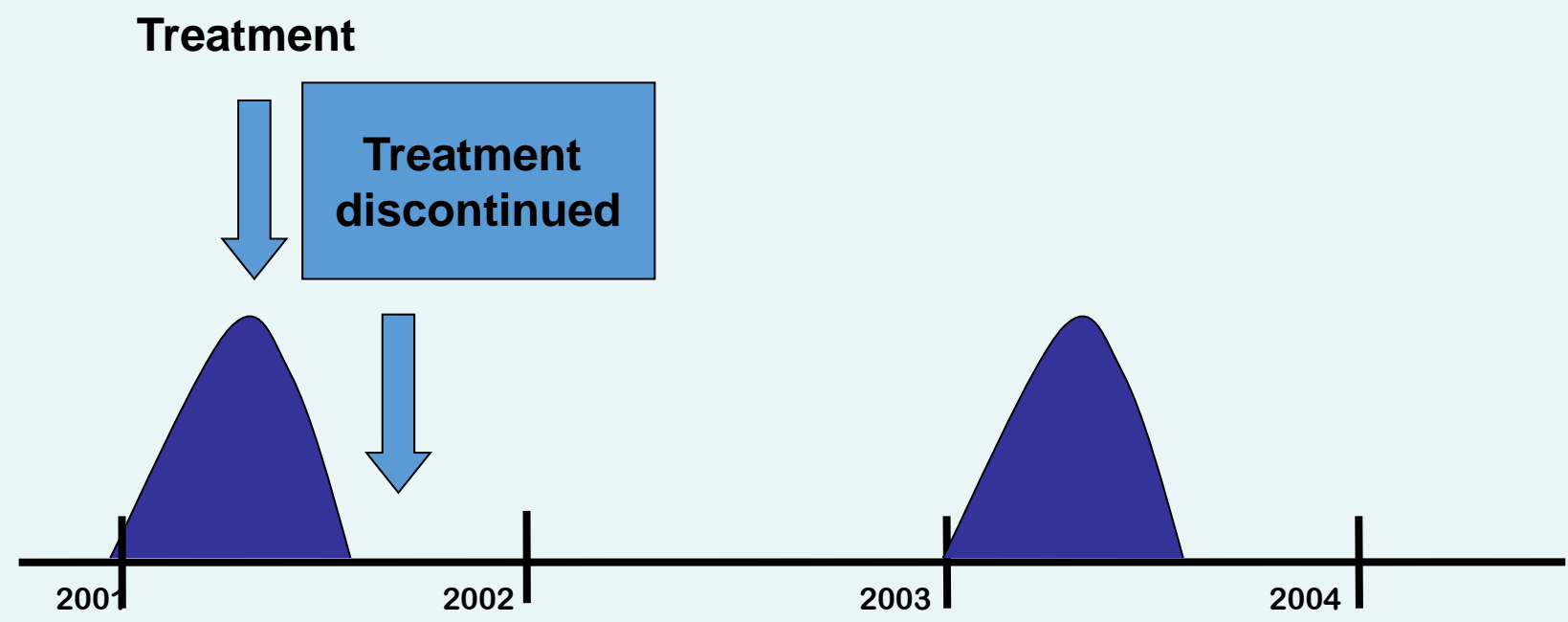
COURSE OF MENTAL ILLNESSES

30-35% of the patients will have one episode only



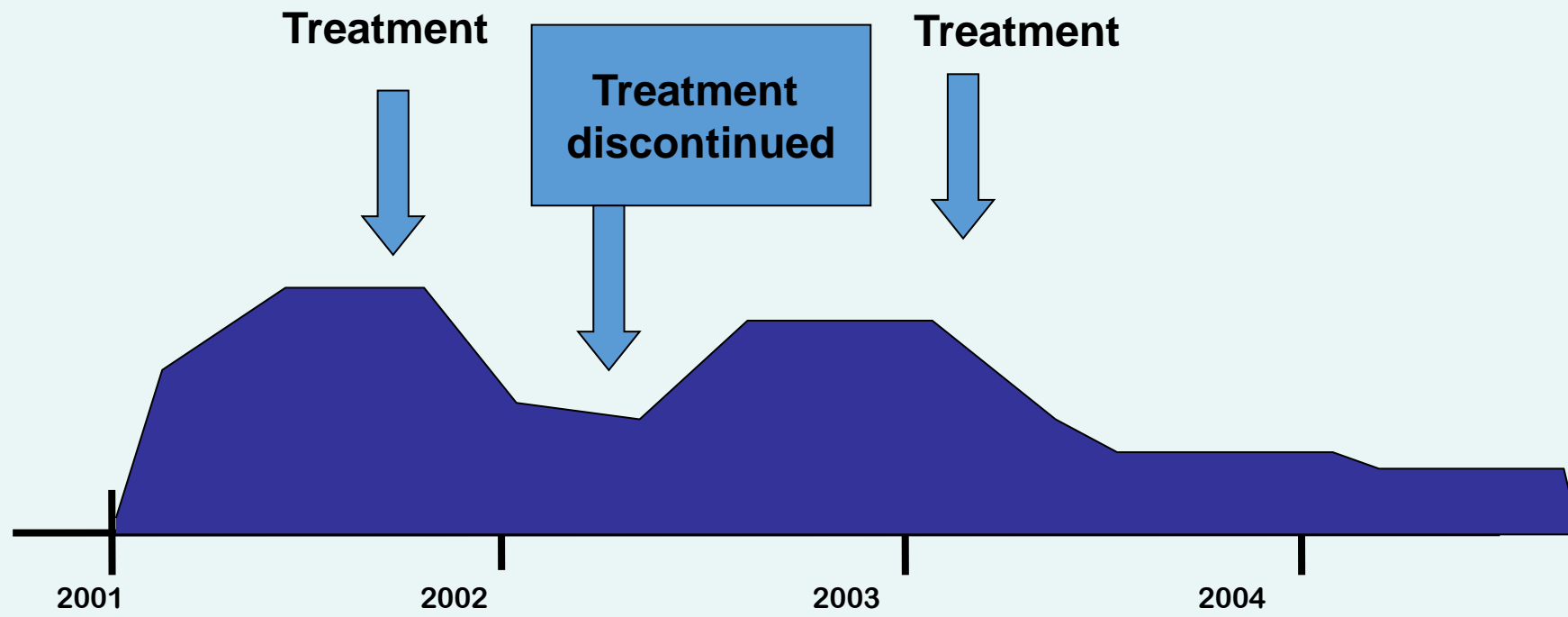


30-35% of the patients may have two or more episodes



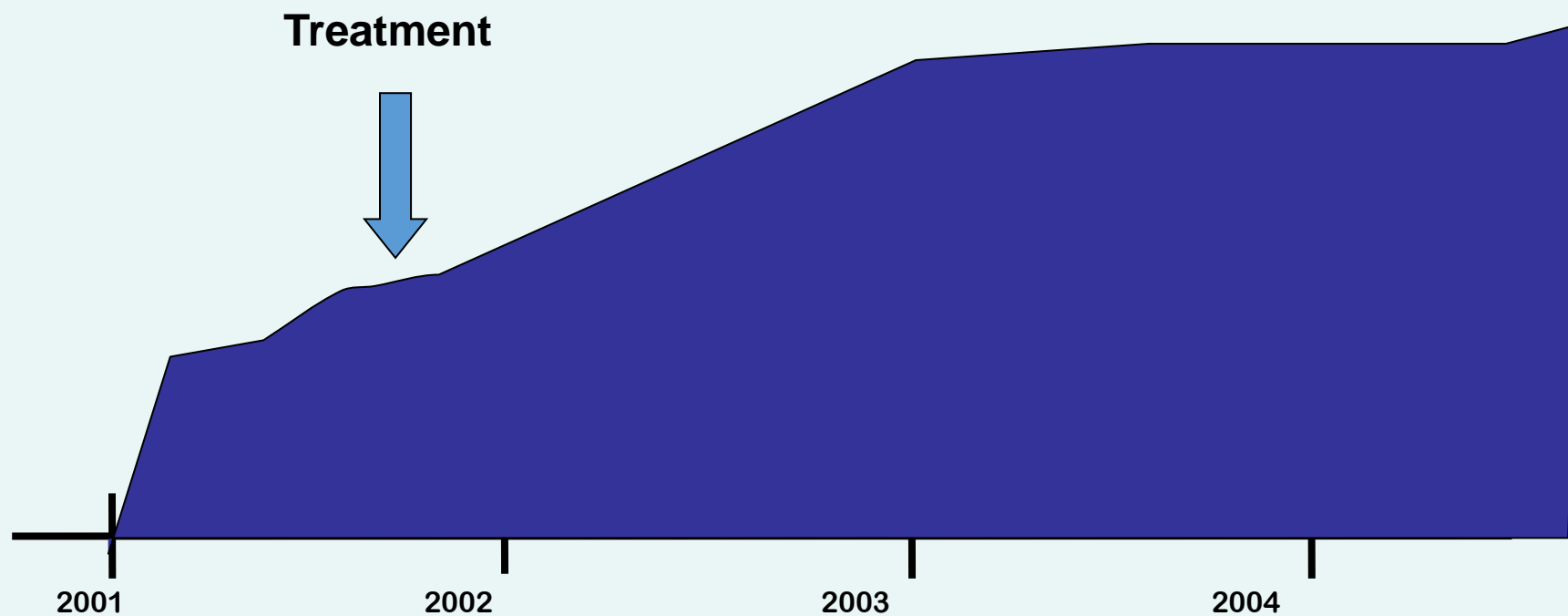


20-30% of the patients may continue to have illness

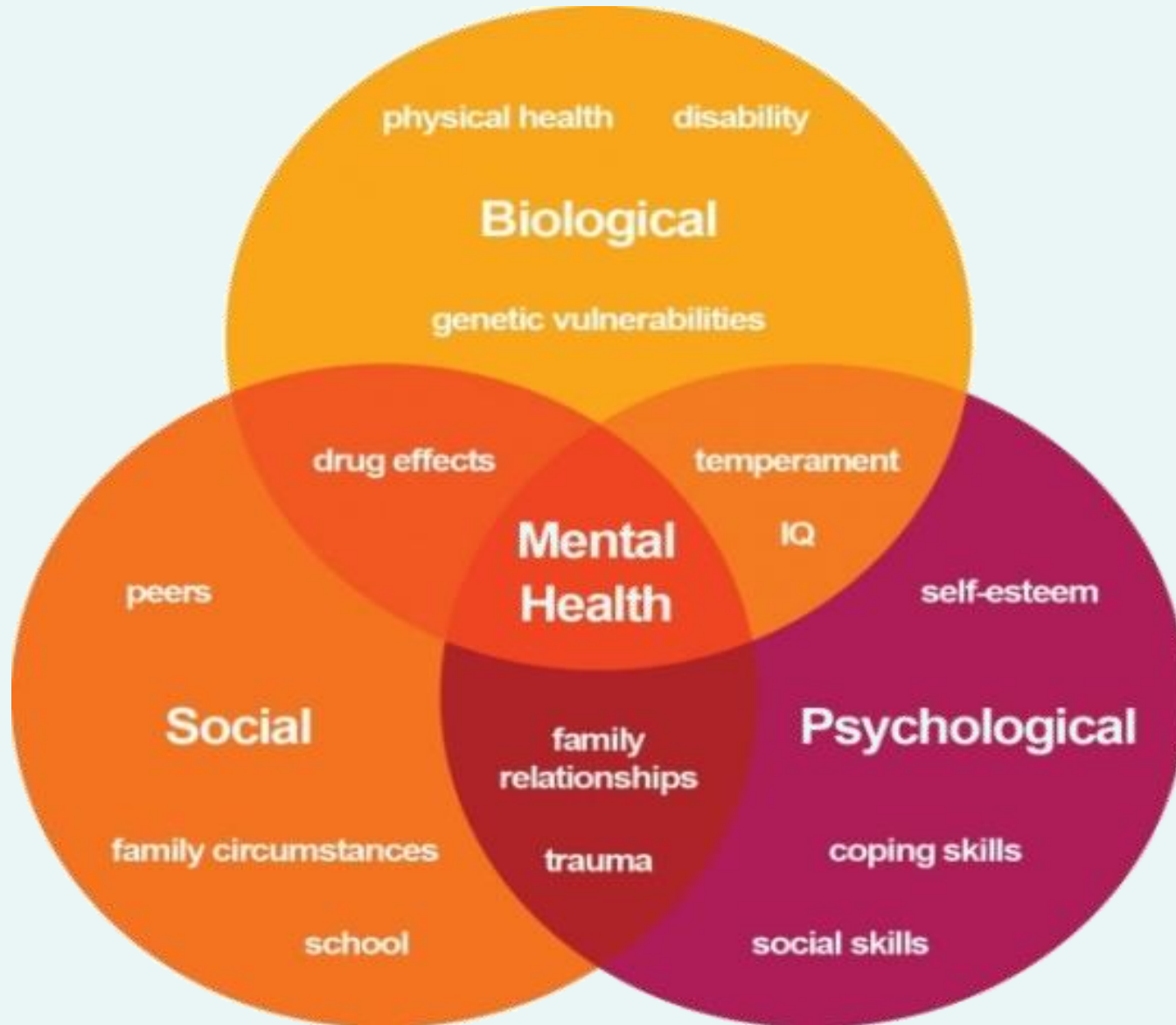




10% of the patients may not improve in spite of best treatment



BIO-PSYCHO-SOCIAL CAUSE OF MENTAL ILLNESS





Mental Health

Biological factors

- Chemical imbalance in brain
- Genetics
- Brain injury
- Chronic illness
- Medications

Psychological factors

- Poor self-esteem
- Negative thinking

Social factors

- Family conflict
- Poverty
- Unemployment
- Poor housing
- Having a baby
- Infertility

Events in childhood

- Violence and abuse
- Emotional neglect
- Death of a parent



RISK FACTORS FOR MENTAL HEALTH DISORDERS



Risk Factors	Level	Protective Factors
<ul style="list-style-type: none">• Pessimistic attitude,• Low self-esteem,• Substance abuse,• Poor lifestyle	Individual	<ul style="list-style-type: none">• Hobbies,• Physical activity,• Meditation/ yoga
<ul style="list-style-type: none">• Broken families,• Harsh discipline styling,• f/h/o mental illness/substance abuse	Family	<ul style="list-style-type: none">• Supportive parents/ caregivers,• Family harmony and stability,• Strong family values
<ul style="list-style-type: none">• Discrimination.• Isolation.• Lack of access to support services,• Socio-economic disadvantage	Community/society	<ul style="list-style-type: none">• Participation in community networks,• Access to support services,• Cultural identity and pride/ acceptance,• Economic security

TO CONCLUDE

- We have a huge responsibility in India regarding the psychiatric morbidity
- We have to find an innovative solutions to provide care for 14 crore population requiring professional help
- We have to reduce the treatment gap for psychiatric illness to zero





Thank You

