



NATIONAL MENTAL HEALTH PROGRAMME

CONCEPT

- The government of India launched the National Mental Health Programme (NMHP) in 1982, keeping in view the heavy burden of mental illness in the community, and the absolute inadequacy of mental health care infrastructure in the country to deal with it.



AIMS

- Prevention and treatment mental neurological disorders and their associated disabilities
- Use of mental health technology to improve general health services
- 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
- To encourage application of mental health knowledge in general health care and 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 NMHP
- Provisions of tertiary care institutions for treatment of mental disorders
- Eradicating stigmatization of mentally ill patients and protecting their rights through regulatory institutions like the central mental health authority, and state mental health authority



APPROACHES

- Integration of mental health care services with the existing general health services
- Utilization of the existing infrastructure of health services and also deliver the minimum mental health care services.
- Provision of appropriate task – oriented training to the existing health staff
- Linkage of mental health services with the existing community development program



COMPONENTS



TREATMENT

- Training MPHW's, HS under MO's for:
 - Management of psychiatric emergencies
 - Administration and supervision of maintenance treatment for chronic psychiatric disorders
 - Diagnosis and management of grandmal epilepsy, especially in children
 - Liaison with local school teachers and parents regarding mental retardation and behavioural problems in children
 - Counselling problems related to alcohol and drug abuse



- Training of MO's:
 - Supervision of MPW's performance
 - Elementary diagnosis
 - Treatment of functional diagnosis
 - Treatment of uncomplicated cases associated with physical disorders
 - Management of uncomplicated psychosocial problems
 - Epidemiological surveillance of mental morbidity



- District hospital
 - At least one psychiatrist
 - Should have 30 – 50 beds
 - Psychiatrist should give most of his time in training and supervision



- Mental hospitals and teaching psychiatric units:
 - Help in care of difficult cases
 - Teaching
 - Specialized facilities like occupational therapy units, psychotherapy, counseling and behavioural therapy



REHABILITATION

- The components include
 - Treatment of epileptics and psychotics at community level
 - Development of rehabilitation centers at district levels and higher referral levels



PREVENTION

- Components include
 - Initial focus on prevention and control of alcohol related problems
 - Later on problems like addictions, juvenile delinquency and acute adjustment problems like suicidal attempts



THANK YOU

