

The Times of India

Title : Mental health rehabilitation still a dream

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Location :

Article Date : 07/21/2015

Mental health rehabilitation sti

Social Stigma, Lack Of Clear Policy Affects The Plans Adversely

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In a state where almost every family has at least one person with psychiatric disorder in its relative circle, there are only three mental health centres functioning in the public health system. Experts say it reflects the state of affairs and could also be the cause of the social stigma associated with the disease.

For example, more than 70% of the mentally-ill patients are in the rehabilitation homes run by various religious organizations, NGOs and a few individuals. The three government institutions are heavily loaded and often cannot accept any new patients.

"Persons rescued from very pitiable conditions including from the streets do not get admitted to the government centres. So we take them to some rehabilitation centre. They remain there, often to become a patient for life, simply because they would not have been evaluated and treated properly," said advocate Litto Palathinkal, president of Kaniyu, a collective for mental health rehabilitation and care homes.

He said that the lack of focus was

apparent from the fact there was no clear policy statement for the mental health sector with visions for both treatment and rehabilitation. "One major reason for the current mess is lack of coordination among the four departments— health, police, social welfare and local self-government. It is the local body which should be given the charge to monitor and it should function in liaison with the others," he said.

In an RTI reply to psychiatrist Dr Ramkumar G S, the health department admitted as much. The comprehensive mental health programme at Rs 20 crore announced by K M Mani in 2013 budget to be executed by NGOs and schools did not have any stakeholder consultations. There were proposals to set up two day care centres each in all districts, one for males and one for females. This was for cured psychiatric patients and those who needed follow up, rehabilitation and ongoing medical care. "The recreation facilities, occupational therapy etc are what make the difference in addressing social stigma," said Ramkumar.

The RTI reply also said that the structure of the plan clearly reflect-

ed that the stakeholder consultations were not made. "The consultative meeting involving the social and educational sector or the NGOs were "not convened" and "committee was not formed" and the people involved in formulating the plan for the day care centres were only "experts from the health department were psychiatrists from medical college and mental health centre and mental health authority."

"Agreed that the conditions of mentally-ill persons in several other states is much worse. They are caged and chained," said Litto. "But in a state where the education sector has both government and aided schools and colleges running with funds from the exchequer, couldn't it be done for these persons whose own family is often not ready to look after them."

The state health secretary Dr K Ellangovan said that the comprehensive health programme was progressing well. Most of the day care centres were being readied and in different stages of development. "At the school level, the plan is to ensure early detection and counselling. Those that needed medication were being directed to the health department for further treatment," he added.

Illustration: Gireesh



MENTAL SCENE

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► Private around 30

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