

## **NATIONAL MENTAL HEALTH PROGRAMME**

1. National Mental Health Program was launched in 1982 in view of the magnitude of mental illness in the country and availability of infrastructure and trained manpower in India.

NMHP has 3 components, namely

1. Treatment of Mentally ill
2. Rehabilitation
3. Prevention and promotion of positive mental health.

**2. District Mental Health Program (DMHP):-** The Central Government launched the District Mental Health Program (DMHP) as a 100% centrally sponsored scheme for first five years, at the national level in 1996-97 during the 9th plan as pilot project.

Objective:-

- i). To provide sustainable basic mental health services to the community and to integrate these services with other health services
- ii). Early detection and treatment of patients within the community itself
- iii). To reduce the stigma of mental illness through public awareness.
- iv) To treat and rehabilitate mental patients within the community

Services: - District Mental Health Team will provide services to the mentally ill and their families as follows:-

- Daily Out-patient (OPD) services
- Ten bedded in services facility (IPD)
- Referral service
- Liaison with Primary Health Center (PHC)
- Provide follow up service
- Community Survey if feasible
- Remove stigma of mental illness by creating awareness in the community

**COMPONENTS:-**

- Personnel
- Equipment, vehicle and other infrastructure
- Medicine, POL, other contingencies etc.
- IEC component – Print, Electronic media, Health Melas etc.
- Training program of various workers up to the grass root level- Doctors, Nurses, Social Workers, Clinical psychologist, Non-professionals like panchayat leaders, ANM, Teachers, Anganwadi Workers (AWW).
- Development of training capsule for various workers & their translation in regional language for use

**CURRENT STATUS:-**

There are three districts which have/are receiving 100% central assistance for District Mental Health Program (DMHP) under National Mental Health Program. This scheme is for a period of 5 years, after which the state has to takeover the scheme. These districts are as given below:-

S.No	District	Nodal Institute	Year of Implementation	Remarks
1.	Muktsar	GMC, Amritsar	2003	Completed 5 years on 31.3 .2008
2.	Hoshiarpur	GMC, Amritsar	2007	-
3.	Sangrur	GMC, Amritsar	2007	-

**3. District Wise Performance:-****3.1 DISTRICT MENTAL HEALTH PROGRAMME (DMHP), MUKTSAR**

District Mukatsar was selected for DMHP as a pilot project with Department of Psychiatry, Govt. Medical College Amritsar as a nodal institute for this program in 1996 -97. The scheme started in the year 2002-03 and has been

completed on 31.03.2008. After this period, the state govt. has to take over the project.

**Achievements: - 1. Training:-**

Five batches of 47 medical officers and six batches of paramedical staff (169 out of 309 in position) and 474 Angan-wadi workers have been trained. 41 Service Providers has also been imparted training during 2007-08.

**2. Clinical Services & IEC Activities:-**

Sr. No.		2009(1.1.09-31.5.09)	2008	2007	2006	2005	2004
1	OPD patients	3049	5436	3035	2049	3268	1627
2	Indoor patients	36	63	65	136	85	102
3.	Special Camps	-	6(patients examined=450)	40	32	27	-
4.	Pamphlets distributed	-	-	20000	30000	20000	-
5.	Booklets distributed	-	-	200	1200	1600	-

**3.2 DISTRICT MENTAL HEALTH PROGRAMME (DMHP), HOSHIARPUR:-**

*The Department of Psychiatry, Govt. Medical College, Amritsar is the Nodal Institute for this program. The program has become functional from 1.07. 07. All the necessary inputs have been provided.*

<b>1. Training:- S.No.</b>	<i>Category of Staff</i>	<i>2007-08</i>	<i>2008-09</i>	<i>2009-10</i>
1.	<i>Medical Officer</i>	32	34	<i>Trainings planned in Sept.2009</i>
2.	<i>Para Medical</i>	40	93	-
3.	<i>Non- Medical e.g Anganwadi Worker,ANM, Panchyat leaders, teachers, parents</i>	-	83	-

## **2. Clinical Services & IEC Activities:-**

<b>S.No.</b>	<b>Clinical Services</b>	<b>2007</b>	<b>2008</b>	<b>2009(1.1.09-31.5.09)</b>
1.	OPD	2609	4224	2005
2.	Indoor	-	119	48
3.	De-Addiction OPD	-	614	320

### **3.3 DISTRICT MENTAL HEALTH PROGRAMME (DMHP), SANGRUR**

*The Department of Psychiatry, Govt. Medical College, Patiala is the Nodal Institute for this program. The program has become functional from 1.07. 07. All the necessary inputs have not been provided.*

#### **1. Training:-**

<i>S.No.</i>	<i>Category of Staff</i>	<i>2007-08</i>	<i>2008-09</i>	<i>2009-10</i>
1.	<i>Medical Officer</i>	-	104	-
2.	<i>Para Medical</i>	-	-	37
3.	<i>Non- Medical e.g Anganwadi Worker,ANM, Panchyat leaders, teachers, parents</i>	-	-	-

## **2. Clinical Services & IEC Activities:-**

<b>S.No.</b>	<b>Clinical Services</b>	<b>2007</b>	<b>2008</b>	<b>2009(1.1.09-31.5.09)</b>
1.	OPD	-	-	1018
2.	Indoor	-	-	
3.	De-Addiction OPD	-	-	

## **B. MENTAL HEALTH ACT 1987**

Under Mental Health Act 1987,

- All the private Psychiatric Hospitals & Nursing Homes are to be registered and licensed. Director, Health & Family Welfare is the Licensing Authority. There are at present 36 licensed licenses Psychiatric Hospitals & Nursing Homes. The licenses of one Psychiatric Nursing Homes is in the process of being renewed.

- Visitor Committees have been constituted in all the districts and monitor the activities of all the private Psychiatric Hospitals & Nursing Homes in the state.
- There is a Punjab State Mental Health Cell (PSMHC) at the Directorate to coordinate the mental health activities in the state.
- Punjab State Mental Health Authority (PSMHA) under the chairmanship of Principal Secretary, Health & Family Welfare (PSHFW) is advisory body on mental health issues. Nodal Officer (mental health) is the member secretary of Punjab State Mental Health Authority (PSMHA).

### **DRUG DEPENDANCE TREATMENT PROGRAMME:-**

Punjab is a border State with international boundaries with golden crescent nations i.e. Pakistan, Afghanistan and Iran. These nations are major producers of opium and India especially Punjab has become transit state in international drug trafficking thus increasing the supply of narcotics within the state & also for domestic consumption.

There is Drug Abuse epidemic affecting the youth especially rural (16-25) and farmers (Institute of Development & Communication, 2000). There is recent evidence of increasing Intra Venous Drug Use (IDU) hovering at 16% of all substance abusers not only in big cities but also in the rural areas especially in Malwa belt and Border districts (UNAIDS and AIIMS, 2007).

The State Government is aware of the gravity of the problem among youth in the State. The steps being taken by the department to curb drug abuse among youth are as given below:-

#### **1. Psychiatrist in the State Health Department :-**

There are 34 psychiatrists working in the Health Department are posted at various Civil Hospitals of the State. There are twenty (20) psychiatrist of the health department trained as Master trainers in Drug Dependence Prevention. They are providing Drug De-Addiction services in these districts along with other psychiatric services to the public.

2. **District Mental Health Program (DMHP)**:- There are three psychiatrists posted under District Mental Health Program (DMHP) at Civil Hospitals Muktsar, Hoshiarpur and Sangrur. These DMHPs are also providing Drug De-Addiction services as a component of mental health services in these districts.

3. **Drug De- Addiction Centers :-** There are 32 Drug De- Addiction Centers are being run in the state:-

a) **Department of Health & Family Welfare :-**

- 1) Civil Hospital, Jalandhar
- 2) Civil Hospital, Tarn Taran,
- 3) Civil Hospital Bathinda,
- 4) Civil Hospital, Faridkot,
- 5) Civil Hospital , Hoshiarpur,
- 6) Civil Hospital ,Kapurthala,
- 7) Civil Hospital , Muktsar

b) **Department of Research & Medical Education -**

- 1) Govt. Medical College, Patiala ,
- 2) Govt. Medical College ,Faridkot ,
- 3) Govt. Medical College, Amritsar ,

c) **Department of Social Security:** - There are 22 Drug dependence Treatment Centers which are run by NGO's (Indian Red Cross and voluntary organization) in the state.

4) **Supply Reduction Initiative:** -The Drugs Control Organization has been conducting surprise inspections through out the state. This effort has led to :-

Recovery of habit forming allopathic drugs worth of Rs 1,29,78,782 approx for the year 2007, Rs.3,17,78,212- for the year of 2008 and Rs. and Rs.2,90,87,631/- in the year 2009 (up to 30-11-09) and the total amount of recovery is Rs.7,38,44,625/- for the two & half consecutive years, from the various chemists shops and un-licensed godown due to the contraventions of provisions of the Drug & Cosmetics Act, 1940.

- The action against the defaulters have been taken, resulting in cancellation of licenses of 35 chemists shop in year 2007, 37 chemists shops in year 2008 and 12 chemists shops in year 2009 due to serious contraventions.
- The licenses of 65 chemists in year 2007, licenses of 80 chemists in year 2008 and licenses of 73 chemists in year 2009 (up to 30-11-09) suspended due to lesser contraventions related to habit forming drugs.
- The prosecutions orders has been issued against 71 defaulters in year 2007, 75 defaulters in the year 2008 and 52 defaulters in the year 2009 (up to 30-11-09) who found either stocking alleged to be habit forming drugs in unlicensed premises.

5. **Demand Reduction Initiative:** - Keeping in view the gravity of the problem, the Department of Health proposes to combat drug abuse in the state by following steps:-

- a) 10 beds have been earmarked for providing De addiction services in the remaining districts civil hospitals. The state will also establish Drug Dependence Treatment Centre in these remaining districts civil hospitals.
- b. A 50 bedded" Swami Vivekanand Drug Dependence Treatment Centre" is being established at Govt. Medical College Campus, Amritsar. The work on the construction of the building of the centre was started on April 2009.
- c. A 20 bedded State level Drug Dependence Treatment Centre at CH Talwandi Saboo is being established at the cost of Rs.2 crore.The construction of the building of the centre was started on Nov. 2008 by

Punjab Health Systems Corporation, (PHSC) and is likely to be completed in December 2009. The centre is expected to be functional soon.

- d. **Drug Dependence Treatment Centre at CH Ferozpur:** - The building of the centre has been completed. The centre is expected to be functional soon.
  
6. **Drug Abuse Study:** - The department has commissioned a study on Drug Abuse among general population in the four border districts of the state in the year 27th May 2009. The report of the study is expected to be submitted to the department before December, 2009.