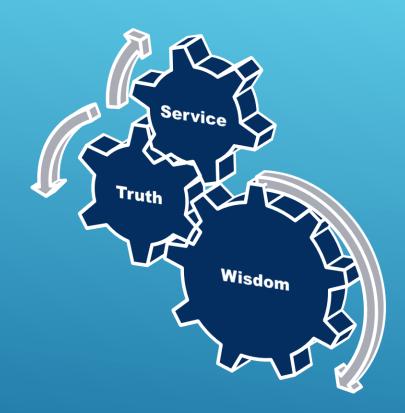


**MENTAL HEALTH CNS Module** 4<sup>th</sup> yr. MBBS. Batch 49 **World Mental Health Day** 10<sup>th</sup> October

Dr Affifa Kalsoom (AP), Dr Imrana Saeed (APMO) Department of Community Medicine

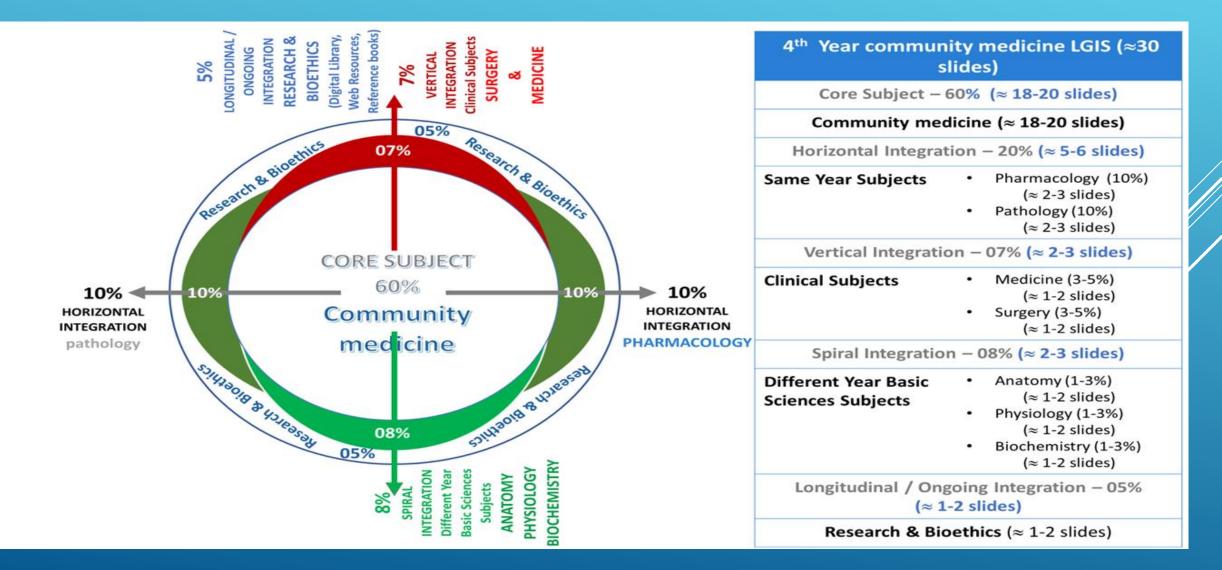


### Vision & Mission of RMU



- 1. To impart evidence-based research oriented medical education
- 2. To provide best possible patient care
- 3. To inculcate the values of mutual respect and ethical practice of medicine

## **Prof Umar's Integration Model**



# Lecture Sequence

Slide Title	No Of Slides
Core Content	20
Vertical Integration	02
Horizontal integration	01
Research	01
Bioethics	01
Digital library access	01
End of lecture assessment	02

# Learning Objectives

By the end of this session students will be able to:

- 1. Understand the components of mental health.
- 2. Understand the etiological factors responsible for mental health deterioration
- 3. Comprehend the preventive aspects of mental health

# DEFINITION

Core Concept

#### Health:

It is a state of complete physical, mental and social wellbeing and merely the absence of disease or infirmity.

#### Mental health:

A person is said to be mentally healthy if he/she is able to cope and function normally in society, meeting the responsibilities and expressing balanced attitude towards day to day challenges.

# **Components of Mental Health**

Core Concept

The six major components of mental health;

- 1. Autonomy (state of being self governing/self control)
- 2. Environmental mastery (ability to change surroundings)
- 3. Personal growth( continues process of growing to greatest ability)
- 4. Positive relations with others
- 5. Purpose in life
- 6. Self acceptance( of ones attributes positive or negative)

# **MENTAL ILLNESS**

Core Concept

An illness with psychological or behavioral manifestation and/or impairment in functioning due to social, psychological, genetic, physical or biological disturbances

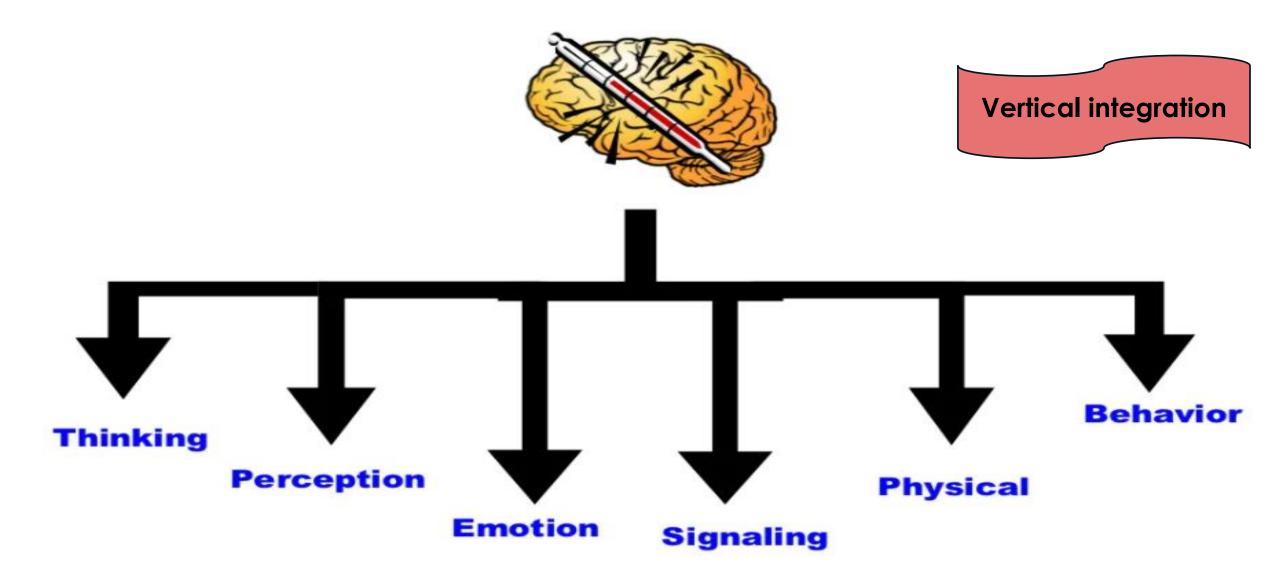
# **Problem Statement**

According to WHO, 1 in every 8 people in the world experience any mental health problem at some stage of life

In 2019, 1 in every 8 people, or 970 million people around the world were living with a mental disorder

In 2020, the number of people living with anxiety and depressive disorders rose significantly because of the COVID-19 pandemic.

## When the brain is **not working properly**, one or more of its **6 functions** will be disrupted



## Pathophysiology of most mental illness

Dopamine

reward, pleasure, obsession Movement disorders

Depression, ADHD SX, Parkinsons, EPS

Schizophrenia, Mania

#### Serotonin

Depression, sleep, appetite, libido, anxiety

Depressive symptoms

Anxiety serotonin syndrome

#### Norepinephrine

Concentration, fatigue, similar to adrenalin, memory recall

Depression decreased cognition fatigue, ADHD sx.

Mania Insomnia Pathology Physiology

horizontal & vertical integration

# **CAUSES OF MENTAL ILLNESS**

Core Concept

- **1. Genetic factors**(genetic variations increase risk of autism, Schizophrenia, depression)
- 2. Physical constitution
- 3. Personality
- **4. Organic conditions**(metabolic/ chronic diseases, cerebral atherosclerosis, neoplasms)/

### 4. Social pathological causes

Core Concept

Combination of social and Environmental factors e.g. stress, worries, anxieties, Poverty, unemployment, illiteracy, homelessness, conflict etc.) others

- ► Toxic substances mercury, lead
- ► Psychotropic drugs alcohol, barbiturates
- Nutritional deficiencies, pyridoxine, thiamine, iodine
- Trauma road accidents, occupational accidents
- ► Radiations

physical health

disability

#### Biological

genetic vulnerabilities

drug effects

temperament

10

Mental Health

self esteem

Social

family circumstances

peers

family relationship

trauma

Psychological

coping skills

social skills

school

## **CLASSIFICATION OF MENTAL ILLNESS**

### Major illness;

- 1. Schizophrenia(living in dream world ,hallucinations, aggressive/cold behavior)
- 2.Manic depressive psychosis symptoms vary from extreme excitement to deep depression

Core

Concept

3. Paranoia (undue suspicion)

#### **Minor illness**

- 1.Neurosis inability to react normally to diff situations
- 2.Personality disorders resulting from unfortunate childhood experiences

# Common Mental Health Problems In Pakistan

Core Concept

- Total disease burden of mental disorders is 4%. An estimated of Over 24 million people in Pakistan in need of psychiatric assistance, the most common ones being:
- 1. Depression(lack of appetite, Interest, energy, suicidal thoughts)
- 2. Schizophrenia (hallucinations, aggressive/cold behavior)
- 3. Post traumatic stress disorder (PTSD)
- 4. Substance abuse
- 5. Epilepsy

## GLOBAL MENTAL HEALTH ACTION PLAN (GMHAP)

GMHAP-this is a plan led by the (WHO) to develop mental health services.

Core

Concept

- •There were 135 countries that helped in the making of a framework which would be the basis for each country in
- developing their mental health services.
- It also includes the support of having a mental health program in a country.
- •It also considers other aspects like livelihood and education as a way to provide people good mental health conditions.

### **Objectives of Global Health Mental Action Plan**

Core Concept

1. Strengthen effective leadership and governance for mental health.

2. Provide comprehensive, integrated and responsive social care services in community based settings

3. Implement strategies for the promotion of mental health and the prevention of mental health problems.

4. Strengthen information systems, evidence and research for mental health

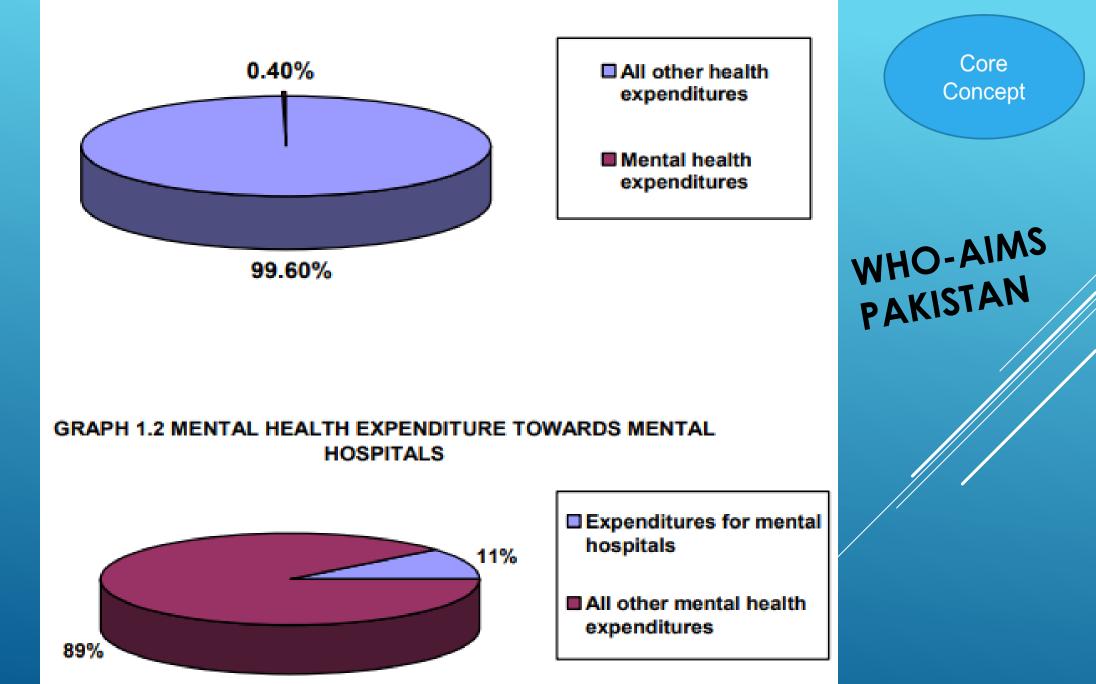
# Dilemma of Psychiatric Care In Pakistan

Core Concept

### Stigma

- Shortage of mental health professionals
- Insufficient physiatrist beds
- Brain drain
- Inadequate psychiatric services in periphery

#### GRAPH 1.1 HEALTH EXPENDITURE TOWARDS MENTAL HEALTH



# Mental Health Services In Pakistan

Core Concept

## According to WHO, in 2010, pakistan had:

- ► 400 Psychiatrists
- >478 psychologists
- > 22 occupational therapists
- > 3728 outpatient mental health facilities
- > 0.19 psychiatrist per 100,000 population (Emro)
- > Expenditure on mental health 0.4% of total health expenditure

# **PREVENTION OF MENTAL ILLNESS**

### Primary prevention:

Core Concept

- 1.Mental health education, especially through mass media (in
- schools and workplaces)
- 2.Improve social environment remove stigma
- 3.Better living conditions
- 4.Eliminate causative agents/reduce risk factors/<u>specific</u> <u>nutrients</u>
- 5.Improved health and welfare resources in communities

#### Secondary prevention:

- 1. Early diagnosis of mental illness
- 2. Screening programs in schools, universities and workplaces/ Counselling

Core

Concept

- 3. Improved <u>Treatment</u> facilities of emerging mental disorders
- 4. Improved clinical care
- 5. Use of modern psychoactive drugs

#### Tertiary prevention:

Core Concept

- 1. <u>Disability limitation by reducing the duration of mental</u> illness
- 2. Reduce stress in family and community to prevent further breakdown
- 3. Group and individual psychotherapy to persons with chronic mental illness
- 4. <u>Rehabilitation</u> to enable patients to achieve the best of possible functional abilities'
- 5. Aftercare services

# WHO RECOMMENDATIONS

Core Concept

- 1. Provide <u>treatment</u> in primary care
- 2. Assuring psychotropic <u>medicine availability</u> at all levels of health care
- 3. Provide community based care
- 4. Educating the public
- 5. Involve communities, families, consumers
- 6. Establish national policy programs and legislation for improving mental health
- 7. Develop <u>human resources</u> such as psychiatrists, psychiatric nurses, psychiatric social workers and therapists
- 8. Linkage with other sectors to <u>eliminate poverty</u>, unemployment and other <u>stress factors</u>
- 9. Monitor community mental health (data collection)
- 10. <u>Research</u>

# **Relevant Research Article**

https://search.app/NZkLcNgzJKonpVXk8

Published online 2022 Jul 26. doi: 10.3389/fpsyt.2022.898009

PMID: <u>35958637</u>

#### Mental Health Prevention and Promotion—A Narrative Review

Vijender Singh, Akash Kumar, and Snehil Gupta<sup>X</sup>\*

Author information > Article notes > Copyright and License information <u>PMC Disclaimer</u>

#### Associated Data

Supplementary Materials

#### Abstract

Go to: 🕨

Extant literature has established the effectiveness of various mental health promotion and prevention strategies, including novel interventions. However, comprehensive literature encompassing all these aspects and challenges and opportunities in implementing such interventions in different settings is still lacking. Therefore, in the current review, we aimed to synthesize existing literature on various mental health promotion and prevention interventions and their effectiveness. Additionally, we intend to highlight various novel approaches to mental health care and their implications across different resource settings and provide future directions. The review highlights the (1) concept of preventive psychiatry, including various mental health

Journal Article

### **Ethical Aspects of Mental Health Care**

Source: PubMed Central (PMC) https://search.app/pRXzL73jkkMrevWL9

The Mental Healthcare explicitly talks about the rights of patients with mental illness (PWMI) and lays down the ethical and legal responsibilities of mental health professionals and the government. The rights of PWMI are at par with the fundamental rights of human beings and need to be clearly talked about as they belong to a vulnerable group from evaluation, treatment, and research perspectives. Such rights translate into the ethics of psychiatric care that relate to respect for autonomy; the principle of non-maleficence, beneficence, and justice; confidentiality (and disclosure); boundary violations; informed consent (and involuntary treatment); etc......

"With rights, come responsibilities!" "An individual has a mental illness, is aware of it, exercises his right to not take treatment, commits a crime, attributes the crime to mental illness, and claims no responsibility for the crime as it was due to the mental illness." An example in the context of disability would be that few patients have insight into their mental illness with intact mental capacity but exercise their "right to refuse treatment." Thus, they do not want to take responsibility for getting treated. However, to avail benefits, they "claim disability" on the grounds of mental illness. How can such an individual exercise his right to refuse treatment; but at the same time claim "benefits" related to his mental illness?

# End of Lecture Assessment (MCQ)

- A 21 yrs. old female comes to you in a mental health facility she is a known epileptic patient. Her mother says that we can't marry her. People will disgrace her in her in laws. What is this phenomenon called?
- > a. stigma of disease
- ⊳b. sick role
- > c. cultural unawareness
- d. patient phobia
- ⊳e. lack of self-esteem.
- ►KEY. a

### End of Lecture Assessment (SEQ)

- A 17 year old boy was brought to hospital by his father. According to his father his son often remains disturbed with obsessions, exhibits morbid fears and unable to focus on studies.
- > a; what do you think is boy mentally healthy? enlist the characteristics of mentally healthy person?
- b; What should be possible preventive measures for maintaining good mental health. Write down at least two measures at each level of prevention?

#### **Recommended Reading Stuff**

Park's Text Book of preventive & Social Medicine.

# HOW TO ACCESS DIGITAL LIBRARY



- 1. Go to the website of HEC National Digital Library.
- 2. On Home Page, click on the INSTITUTES.
- 3. A page will appear showing the universities from Public and Private Sector and other Institutes which have access to HEC National Digital Library HNDL.
- 4. Select your desired Institute.
- 5. A page will appear showing the resources of the institution
- 6. Journals and Researches will appear
- 7. You can find a Journal by clicking on JOURNALS AND DATABASE and enter a keyword to search for your desired journal.

http://www.digitallibrary.edu.pk/