



Mental Health Awareness

For Service Providers 2014

Tamil Nadu



NATIONAL HEALTH MISSION

State Health Society - TN

DMS Complex, Chennai



Circular No.3 / 2014

Roc No: 3543 / P5 / SHS / 2014

Date 12.05.2014





Circular No.3/2014

Roc No: 3543/P5/SHS/2014, Dated, 12.05.2014

"I was never really insane except upon occasions when my heart was touched"

- **Edgar Allan Poe**

Sub: District Mental Health Programme (DMHP) – Principles – Guidance for
the implantation - DMHP and DMHT – Field operations – Reg

Ref: 12th Five Year Plan – Document - District Mental Health
Programme

What are the simple ways to realize the Nation Mental Health Program aims and objectives?

- I. Psychiatric facilities should be made available in all District head quarters hospital in near future and psychiatrists should be made available in all taluk head quarter's hospital should be aimed at
- II. No of seats in Post Graduation in Psychiatry should be increased by starting PG Courses in Psychiatry in more medical colleges
- III. All psychiatric facilities should be provided with 2 psychiatric social workers and one clinical psychologist.
- IV. All medical officers belonging to other specialties should be imparted training in recognition of various mental disorders, giving first aid treatment and referral to nearby psychiatric facilities. They also have to be trained in treating common mental disorders.
- V. All staff nurses and paramedical personnel will have to be trained in recognition of psychiatric disorders.



- VI. Public awareness with regard to various psychiatric problems will have to be created among public by conducting public awareness programme, and mental health exhibitions. Mass media like newspapers, magazines, and TV Channels may be used for creating awareness among the society
- VII. Rehabilitation centers will have to be started in all the districts by the government individually and in collaboration with NGOs.
- VIII. NGOs will have to be encouraged to participate in providing best possible mental health care
- IX. The forum of State Mental Health Authority may be utilized effectively to monitor and to ensure that mental health care is provided as per the regulations of mental health care act.
- X. Judicial personnel & Law enforcing authorities, school teachers have to be trained in recognition and referral of persons with mental illnesses,

The JDHS and District Psychiatrist are requested to prepare the reports for the above points in the formats given for each points for discussion during the review.

I. Psychiatric facilities should be made available in all District headquarters hospital and psychiatrists should be made available in all taluk headquarters hospital

District :

JDHS:

District Psychiatrist :

Psychiatrist (DMHT):

Sr.No	Category of Institutions – DHQ/ TK/ NTK / Private Hospital / Pvt Clinic	Person In charge – Psychiatry	Timing Duration	Contact Cell Number	Total Bed Strength and Psychiatry Beds
1					
2					
3					
4					
5					
6					



Time Frame: This data is already available and can be brought during review meeting.

If there are sanctioned posts and vacancy please indicate in the public institutions.
In the speciality post if non specialist are posted / available should also be indicated.

II. Unit run by - Post Graduation in Psychiatry – PG Courses in Psychiatry

III. All psychiatric facilities should be provided with 2 psychiatric social workers and one clinical psychologist.

Name of Institution:

Category :

Details for all staff members engaged –SN, Technicians etc

If ambulance available give details

Sl.No	Category of Staff Engaged in the Institution	Name	Qualification	Total Years of Service	Contact Number
1					
2					
3					
4					
5					

In govt institutions details to be given are the psychiatrist in time scale and psychiatrist on contract to be indicated and for the staff nurses and technicians. If any other category of staff are available kindly mention it.

Time Frame: Report to be given on 26.05.2014 during review meeting.



IV. All medical officers in the institution belonging to other specialities should be training in recognition of various mental disorders, giving first aid treatment and referral to nearby psychiatric facilities. They also have to be trained in treating common mental disorders.

Name of Institution:

S l . No	Name of all Medical Officers other than Psychiatrist	Qualification	Training to treat Common Mental Disorders	Training to Give First aid and Referral	Number cases seen per month
1					
2					
3					
4					
5					

Training organized by private institutions also to be included. Already trained will be available and the time frame to submit is 26th May 2014. Please give untrained persons in the district for both points 4& 5.

V. All staff nurses and paramedical personnel should be give training in recognition of psychiatric disorders.

Name of Institution:

S l . No	Name of all Staff Nurses in Psychiatrist	Qualification	Training to Recognize Common Mental Disorders	Training to Give First aid and Referral - During emergency
1				
2				
3				
4				
5				



Activities on IEC by all agencies in the district are to be given. News items can also be included in point no 6.

VI. Public awareness with regard to various psychiatric problems among public by conducting public awareness programme, and mental health exhibitions. Mass media like newspapers, magazines, and TV Channels may be used for creating awareness among the society

District :

JDHS :

Please attach locally developed IEC material.

Sl. No	IEC / Media Psychiatrist	Planned – for the year	Carried out	Approximate Beneficiaries
1	School Program			
2	Work Place Program			
3	Exhibition			
4	News Paper			
5	Magazines -			
6	TV			
7	Others Specify			

In the district non conventional rehab units like temple, dhurga, homes etc should be included and are to be watched.



VII. Rehabilitation centers will have to be started in all the districts by the government individually and in collaboration with NGOs.

District:

JDHS:

Sl. No	Type of cases 2013-14	Number of cases Referred For Rehabilitation Within District	Outside district	Referral Institution - Govt	Referral Institution Private
1					
2					
3					
4					
5					

There are many positive innovative approach in the district say for example Self Help Group involvement etc.

Wherever you can provide photographic support kindly bring them.

8. NGOs will have to be encouraged to participate in providing best possible mental health care

District:

JDHS:

Sl. No	Best Practices / Diagnosis	Govt Institution	Private Institution	Can this be universalized?	Referral Institution Private
1					
2					
3					
4					
Give Description wherever possible with Photograph					



Some are under support from other agencies and these items should be included and it may take some time to collect and so the time frame is one month. Report should be sent on 20 June 2014 for point no: 8.

9. The forum of State Mental Health Authority may be utilized effectively to monitor and to ensure that mental health care is provided as per the regulations of mental health care Act.

District:

JDHS:

Sl. No	Is the district Implementing the State Mental Health Rule	If yes give narration	If no what are the difficulties?	Is other act relating mental health is implemented? Say Prevention of Begging? Sale of Tobacco etc	If so how it is implemented - Give narration
1					
2					
3					
4					
5					
6					

Time frame is one month.



10. Judicial personnel & Law enforcing authorities, school teachers have to be trained in recognition and referral of persons with mental illnesses

District:

JDHS:

Sl. No	Name of Law Enforcing Units	Number Planned –	Number Conducted -through Govt or NGO / Private	Number of beneficiaries
1	Jail			
2	Police Training Institutes / Others			
3	Judicial Offices			
4	School / College Teachers			
5	Social Welfare / Rehab Department			
6	PHC / Public Health Department			

For point no: 10 the Psychiatrists are very much involved in Jail Visit and also for giving certificate on disability and so it is possible to give details on activity of the past one year.

Time frame for point no; 10 is during the review on 26.05.14.

Further other initiatives details are to be furnished during the review for Suicide Prevention as per the heading given below.

What are the special initiatives in Tamil Nadu?

SUICIDE PREVENTION

Suicide - one of the commonest manifestations of major mental illness. In India, 1.2 lakh people end their life every year by committing suicide. Nearly 4 lakh persons attempts to commit suicide. Globally, 1 million people die from suicide annually. Around the world, almost one million people die due to suicide every year, and it is the third leading cause of death among young people. In the last 45 years, suicide rates have increased by 60% worldwide. Mental disorders, particularly Depression and Substance abuse are associated with more than 90% of all cases of suicide. Asia accounts 60% of world's suicide. India, china and Japan accounts for 40% of their number.



What is meant by Suicide, Attempted suicide and Para suicide?

Suicide

The term suicide is used to denote self-planned and deliberate termination of one's life. It is as old as mankind and is indeed a giant puzzle. It is a paradox why humans who love to live a full life turn to self destruction.

Attempted suicide:-

Among those who attempt suicide, a few succeed, but some survive due to timely intervention of chance factors in spite of best planning and clear cut intention to die. They are known as 'Attempted suicide'.

Para suicide:-

It is an impulsive act of self – injurious behaviour without any prior planning or intent to die. The harm to self may be done by inflicting injury or consuming a substance. It is otherwise known as Deliberate Self-Harm (DSH)

Overlap:-

A Person who tries to terminate his life with real intent may survive. So much so, an individual who injure himself impulsively without any real intent to die may lose his life.

Based on the above guidance JD HS / Psychiatrist requested to make power point and to be brought during the review and each district will be given 5 minutes to present the district profile with gap analysis on the 26 May 2014 at Chennai at 11.00 am in SHS Conference Hall.

Sd/ ...

Dr.C.N. Mahesvaran, I.A.S
Mission Director,
National Health Mission.



To

The All District Collectors

The Director of Medical Education

The Director of Medical & Rural Health Services

The Director of Public Health & Preventive Medicine

All Joint Directors in the District

All Deputy Director of Health Services

All professor's of Psychiatry

District Psychiatrist

Medical Superintendent of Taluk & District Hospitals & Non-Taluk Hospitals

All Primary Health Center Medical Officers

Programme Officers and HUD's of Vertical Programme

Copy Submitted to Secretary to Government

Health & Family Welfare Department,

Secretariat, Chennai.