

Childhood and Adolescence: Challenges in Mental Health

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Abstract

Mental health is an integral and essential component of health. The World Health Organization (WHO) constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." More than 450 million people suffer from mental disorders worldwide. In India, mental health services, especially for children and adolescents, are limited both in terms of number of *facilities* as well as *trained professionals*. The majority of mental health services are restricted to urban areas, that is, medical colleges or regional mental health institutes. Mere presence of a treatment facility does not guarantee that all children/adolescents suffering from mental illness will utilize such services. In fact, most of the time there is a significant delay from the patient side in accessing mental health services either because of lack of awareness or associated stigma. It is high time to promote positive mental health in children, adolescents and their parents through health education. Parental counseling is of utmost importance in order to avoid the delay in treatment seeking.

Key Words: *mental health, challenges, India*

Résumé

La santé mentale est partie intégrante et essentielle de la santé. Selon la Constitution de l'Organisation mondiale de la santé: « La santé est un état de complet bien-être physique, mental et social, et ne consiste pas seulement en une absence de maladie ou d'infirmité. » Plus de 450 millions de gens souffrent de troubles mentaux dans le monde entier. En Inde, les services de santé mentale, spécialement ceux pour les enfants et les adolescents, sont limités tant par le nombre d'*installations* que par celui de *professionnels compétents*. La majorité des services de santé mentale se confine aux zones urbaines, c'est-à-dire aux écoles de médecine ou aux établissements régionaux de santé mentale. Même à cela, la seule présence d'un établissement de traitement ne garantit pas que tous les enfants/adolescents souffrant d'une maladie mentale utiliseront ce service. En fait, la plupart du temps, il y a un délai significatif de la part des patients à accéder aux services de santé mentale, soit par ignorance ou à cause des stigmates associés. Il est plus que temps de promouvoir la bonne santé mentale chez les enfants, les adolescents et leurs parents au moyen de l'éducation sur la santé. La consultation parentale est d'une importance primordiale afin d'éviter le retard d'accès au traitement.

Mots clés: *santé mentale, problèmes, Inde*

Mental health is an integral and essential component of health. The World Health Organization (WHO) constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." More than 450 million people suffer from mental disorders worldwide (WHO, 2010).

In India, mental health services, especially for children and adolescents, are limited both in terms of number of *facilities* as well as *trained professionals* (WHO-AIMS, 2006). WHO Atlas highlights the low number of mental health professionals in India. The average national deficit of psychiatrists is estimated to be 77% (WHO, 2005). The

majority of mental health services are restricted to urban areas, that is, medical colleges or regional mental health institutes. Mere presence of a treatment facility does not guarantee that all children/adolescents suffering from mental illness will utilize such services. In fact, most of the time there is a significant delay from the patient side in accessing mental health services either because of lack of awareness or associated stigma. This delay in seeking appropriate treatment may lead to increase in severity of mental illness along with prolonged treatment duration, making the clinician's job even more challenging to have a favorable outcome. India is home to a pluralistic approach to all types

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Submitted: November 26, 2012; Accepted: January 15, 2013

of healthcare. Not only are there other systems of health-care other than modern medicine such as Ayurveda, Unani, naturopathy and homoeopathy, but also people approach religious places for help, especially in case of mental illness. The main challenge in improvement of mental health services is its accessibility and availability for those who are in need of them. It is seen that access to mental health services for a child with a mental, emotional or behavioral disorder is substandard, not provided early enough, in sufficient supply. Considering the scarcity of available facilities and the long-term follow-up (psychotherapy or monitoring the doses and side-effects of drugs) it becomes difficult for children and their families to stay away from their home, in the hospital, until the child/adolescent recovers from the illness. Even if diagnosed and treated in time, the outcome may not be the same as expected by the clinician mainly because of the lack of compliance pertaining to treatment or follow-up (Khandelwal, Jhingan, Ramesh, Gupta, & Srivastava, 2004).

It is high time to promote positive mental health in children, adolescents and their parents through health education. Parental counseling is of utmost importance in order to avoid the delay in treatment seeking (Kumar, 2011). Under the national mental health program in India, medical officers in primary health centres are trained to diagnose and treat children/adolescents at the earliest stages of their mental illness. This training of medical officers will help in expansion of the now limited services (Kumar, 2011). But the fact remains that only a minor fraction of them have been trained until now and even though they are trained, only a few of the psychiatric medications are available at their

expense. Inconsistent use of standardized and validated screening and assessment tools by the clinicians remains another important challenge, which needs to be addressed, in the management of mental health disorders (Sand et al., 2005).

The importance of psychological well-being in children and adolescents, for healthy emotional, social, physical, cognitive and educational development, is well recognized. However, a large gap exists in the area of prevention and mental health promotion that mainly requires integration of mental health into pediatric primary care and strengthening of the existing human resources and infrastructure.

Acknowledgements / Conflicts of Interest

The authors have no financial relationships to disclose.

References

- Khandelwal, S. K., Jhingan, H. P., Ramesh, S., Gupta, R. K., & Srivastava, V. K. (2004). India mental health country profile. *International Review of Psychiatry*, *16*(1-2), 126-141.
- Kumar, A. (2011). Mental health services in rural India: Challenges and prospects. *Health*, *3*(12), 757-761.
- Sand, N., Silverstein, M., Glascoe, F. P., Gupta, V. B., Tonniges, T. P., & O'Connor, K. G. (2005). Pediatricians' reported practices regarding developmental screening: Do guidelines work? Do they help? *Pediatrics*, *116*(1), 174-179.
- World Health Organization (2010). Mental health: Strengthening our response. Available from: <http://www.who.int/mediacentre/factsheets/fs220/en/index.html> (Accessed on 28 September 2012).
- World Health Organization (2005). Mental health atlas. Geneva: World Health Organization.
- WHO-AIMS Report on Mental Health System in Uttarkhand, India. (2006). WHO and Ministry of Health, Dehradun, Uttarkhand, India.