Annual Mental Health Bulletin - 2016

Message from the Director

Welcome to the first bulletin of the Directorate of Mental Health, Ministry of Health, Sri Lanka. The Directorate of Mental Health was established in 1998 as the national focal point for mental health at the Ministry of Health.

The Directorate is entrusted with the responsibility of the National Mental Health Programme with respect to policy development and strategic planning; thereby strengthening of mental health services by improving infrastructure, developing human resources and monitoring and evaluation of mental health programmes island wide.

This bulletin features updates of the national and provincial level mental health initiatives, progress and vital information that are shaping the mental health service provisions in Sri Lanka.

We hope you would enjoy reading this bulletin. We also encourage you to contact us with your suggestions for future bulletins.

Dr.Chithramalee de Silva Director / Mental Health

Vision

A society where mental well-being and human rights are valued and promoted, and people with mental disorders have timely and affordable access to comprehensive, integrated, effective, and culturally appropriate mental health and psychosocial care, free from stigma and discrimination.

Mission

Establish an enabling environment for the enhancement of mental wellbeing for all, through mental health promotion, illness prevention, treatment and rehabilitation, psychosocial care and protection of human rights.

Introduction

The Directorate of Mental Health is the national level focal point of the Ministry of Health for developing policies and strategies for mental health programme, strengthening of mental health services including human resource and infrastructure development. It also carries out research on burden of diseases and monitors and evaluates the implementation of national mental health programme.

Major Strategies of Mental Health Programme

- 1. Promotion of mental well being
- 2. Prevention of suicide
- 3. Prevention and control of substance use including alcohol
- 4. Prevention of violence
- 5. Strengthen infrastructure and human resources for mental health
- 6. Monitoring and evaluation of the Mental Health Programme

National Mental Health Review

The national mental health review is a way of monitoring and evaluation of the progress of the National Mental Health Programme where Medical Officers/Mental Health (Focal Point) of all districts, relevant Consultant Psychiatrists and other stakeholders of mental health participate and discuss the ongoing programmes of the respective districts and related issues.

The annual national mental health review was held in April, 2016 and was aimed at medical officers of mental health. The event was attended by 40 medical officers and the sessions covered:

- The role and responsibilities of medical officers of mental health
- Monitoring and evaluation of national mental health programme
- The need for revising Management Information System on Mental Health, and updating mental health professionals on child psychiatry
- Case studies and presentations

During the review the most effective ways of implementing the strategies were discussed in depth, particularly on addressing deliberate self-harm. Process to link with other organizations as well as overall network activities with Ministry of Education were also addressed.

The 2nd day of the workshop was themed on community mental health programmes, alcohol rehabilitation and to share and discuss issues that the service providers would find helpful in carrying out their role. This gave an opportunity for Mental Health Directorate to showcase their work and also for medical officers to network and share ideas.

National Events

World Mental Health Day - 10th October 2016





- The World Mental Health Day was successfully organized and celebrated on the 10th of October 2016 at Sri Lanka Foundation, Colombo with theme of "Dignity in Mental Health; Psychological and Mental Health First Aid for All."
- The chief guest was the Hon. State Minister of city planning and water supply, Dr. Sudharshani Fernandopulle and the event was attended with over 150 participants.
- An iconic feature of the event was the drama presented by the staff of the National Institute of Mental Health (NIMH).

National Alcohol Summit





- National Alcohol Summit 2016 was held in collaboration with National Alcohol and Tobacco Authority (NATA) under the patronage of Hon. Minister of Health, Dr.Rajitha Senarathna at BMICH on the 4th of August 2016. The theme of the summit was "Towards an Alcohol Free Sri Lanka".
- This year's summit became the most successful event on that theme in the calendar of Mental Health Directorate with the launching of the National Policy on Alcohol Control, fulfilling the long felt need for a such policy in Sri Lanka.
- The policy aims to eliminate all forms of promotion of alcohol products, to enforce pricing, trade and investment policies related to the different aspects of alcohol trade, to reduce availability af and accessibility to alcohol and to strengthen supportive services and rehabilitation with assistance from the community.

Progress of Activities -2016

Promotion of Mental Well being



- Conducted Mindfulness programmes and yoga sessions
- Printed a booklet for community workers and primary care staff on mental health to help them to identify mental health problems early.

Standard Patient Care

Process of finalizing the guideline for,
Medium stay units
community support centers.

Prevention of Suicide and Attempted Suicide





- Activities conducted in collaboration with the Directorate for suicide prevention day;
 - 1. Inter school debate competition in Galle district
 - 2. Art competition and exhibition on suicide prevention in Polonnaruwa
 - 3. Seminar on suicide prevention in Colombo

Prevention and Control of Substance Use including Alcohol

- Issued a circular to all health institutions on strengthening of alcohol control activities at community settings.
- Launching of National Policy on Alcohol Control.
- Conduction of alcohol summit with an advocacy meeting chaired by Hon. Minister of Health and technical workshop with the participation of Regional Advisor for Mental Health SEARO, Dr. Nazneen Anwar and Technical Officer -Substance abuse WHO Head Quarters, Dr. Dag Rekve.
- Training of health staff in Anuradhapura district in alcohol prevention & control and clinical management of addicted patients.

Prevention of Violence

Carried out media workshops on mental health issues such as gender based violence, Autism and alcohol abuse.



Development of Infrastructure and Human Resources

Infrastructure

- Supported infrastructure improvement of the following areas:
 - Establishment of an Alcohol Rehabilitation Center at Rambukkana - Kegalle district
 - 2. Renovation of acute psychiatry ward at DGH Vavuniya
 - Renovation of mental health units at DH-Mawathagama, BH-Mawanella, BH-Diyathalawa and DH-Kottantiv
- Improved transport facilities in Anuradhapura and Monaragala districts by providing two vans
- Procurement of supplies for Mental Health Units of RDHS Matara, Badulla, Ampara, Kandy and Puttalam

Human Resource Development

- Carried out consultative meetings on Human resource development
- Increased the intake of Occupational Therapists for mental health
- Actions taken to fill provincial vacancies of Psychiatry Social Workers
- Finalized the duty list of Community Psychiatry Nurse

Capacity building of mental health professionals and other health & non-health professionals:

- A three day Training of Trainers (TOT) workshop on mindfulness was conducted with the group of 60 mental health professionals under the guidance of mental health professional from Thailand.
- Four officers were sent on a fellowship to attend a three week training course on community mental health in Thailand.
- Training of Trainers programmes were conducted on "psychosocial first aid in emergencies/disasters" for health and non-health professionals to implement it in district level.
- Orientation programmes on mental health were conducted for Medical Officers of Health, post basic trainee Nursing officers, post graduate trainees of MSc in Community Medicine.



Monitoring and evaluation of the National Mental Health programme

- The Management Information System (MIS) on Mental Health was reviewed and revised in a consultative process with relevant stakeholders and specialists. The following formats are piloted in 2017;
 - -Monthly Return on Mental Health Activities
 - -Consolidated Quarterly Return on Mental Health Activities
 - Quarterly Return of Medical Officer/Mental Health (Focal Point)
- Participated in Annual District Mental Health Reviews to identify the problems related to implementation of mental health programme and improve the service delivery at district level.

Research

 Initiated the validation of Sinhala and Tamil versions of Mini International Neuropsychiatric Interview Tool for Sri Lanka to conduct the National Mental Health Prevalence Survey in 2017.

Mental Health Statistics

Figure 1. Trends in Mental disorders based on hospital admissions in Sri Lanka 1996- 2013

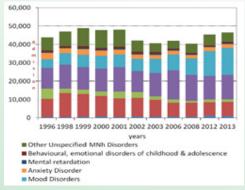


Figure 2. Trends in suicides in Sri Lanka 2011-2016

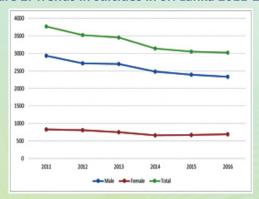
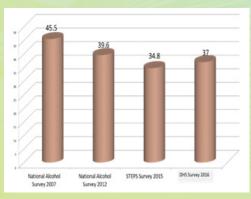


Figure 3. Prevalence of Alcohol Use in Sri Lanka



Do you know the latest updates on Autism?

Autism

Autism is a neuro-developmental disorder, where development of the brain is affected from very early stages. One in 110 children is at a risk of developing Autism and this risk is 3-4 times higher in male children. Aetiology of Autism is unknown. Even though Autism is known to be inherited, there may be other causative environmental factors such as chemicals, poisons, etc. However, it is not caused by the problems related to the care given to the child by the parents. The risk of sibling getting the same condition is higher especially among boys and risk is around 50%. Therefore consultation with a doctor before planning next pregnancy is important. Epilepsy and sleep disorders may found to occur in children with Autism.

Autism is not a disaster but the ignorance is! Autism must be detected as early as possible and intervened effectively according to the presentation of the individual child. Symptoms of Autism occur in three main domains; social interactions, communication, repetitive and restricted behaviors. Symptoms of Autism can be fully recognized by the age of three but there are ten identified risk symptoms which can be helpful in early recognition of the condition. These are called Red flag signs.



- 1. Failure to make eye contact by the age of six months
- 2. Failure to share objects, smiles or emotions by the age of nine months
- 3. Failure to develop speech or regression of acquired speech by the age of one year
- 4. Failure to use gestures to communicate by the age of one year
- 5. Failure to respond calls and commands by the age of one year
- 6. Failure to utilize meaningful words by one year to eighteen months
- 7. Failure to point out what child wants by one year to eighteen months
- 8. Failure to join with someone to share an interest by one year to eighteen months
- 9. Failure to engage in imitative play by eighteen months
- 10. Failure to engage in simple meaningful conversation by two years

Diagnosis of Autism is done through clinical observation by a consultant psychiatrist. There are no drugs available as treatment for Autism. Early intensive behavior intervention helps child to talk, walk and interact with others. Comprehensible multidisciplinary care is mandatory which includes medical care, nursing care, occupational therapy, physiotherapy, speech and language therapy and educational therapy. Parents and caregivers also play a major role in the treatment of Autism.

Even though Autism is a lifelong disability, its severity and symptoms may change over time. Therefore long term effects may vary. Many of the children with Autism who learn to speak and who learn to express their ideas before the age of 6 years with good level of intellectuality will have a better prognosis.