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School of Psychiatry and Clinical Neurosciences
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Innovation in deinstitutionalization:
A WHO expert survey
Discussion

International Forum on Innovation in Mental health
Gulbenkian Global Mental Health Platform **3rd**
and 4th October 2013, Lisbon

Mohan Isaac
Professor of Psychiatry

Plan of presentation

- **Deinstitutionalization: in the West and in LAMIC**

- **Comment / discuss: "Innovations in deinstitutionalization: A WHO expert survey"**

- **Consequences of deinstitutionalization in the West: any lessons for LAMIC?**

Deinstitutionalization: in the West and in LAMIC

USA:

Number of public psychiatric beds available per 100,000 population:

1955   -   340 (total number – 5582329)

2005   -   17 (total number – 50509)

2010   -   14 (total number – 43318)

Minimum number required (expert consensus) – 50

(Fuller Torrey et al 2012)

Deinstitutionalization:
in the West and in LAMIC

UK

Total number of psychiatric beds:

1954 - 155,000 +

2008 - 27000

(Peter Tyrer, 2011)

Deinstitutionalization: West and in LAMIC

Number of conventional psychiatric inpatient beds available per 100,000 population, in 2006:

- **Austria – 53.1**

- **Denmark – 75.8**

- **England – 59.1**

- **Germany -153.0**

- **Italy – 16.5**

- **Netherlands – 136.1**

- **Switzerland – 105.5**

- **Spain – 35.7**

- **Republic of Ireland – 79.9**

(Priebe et al 2008)

Deinstitutionalization:
in the West and in LAMIC

India:

Total number of mental hospital beds:

1947   -   around 10,000

1999   -   around 20,000

Number of public psychiatric beds per 100,000 population, in 1999: 1.7

(National Human Rights Commission, India, 1999)

Mental health services in LAMIC e.g. India

- **Public sector institutions**

- **Private sector**

- **Primary care – urban, rural**

- **Non-governmental organizations (NGOs)**

- **Traditional healers and alternate systems of care**

- **Family and the community**

Innovations in deinstitutionalization:
A WHO expert survey

Methods to downsize institution-based care and organize community based services

Use of mobile clinics / outreach services

- "Extension services"

Fixed location, fixed day of the week / month

Services and medications – "free of charge"

- Role of "mental health care' camps

Beds outside mental hospitals

- **General hospital psychiatry units** – providing inpatient and out patient services

- **Psychiatry beds at district level hospitals**

- Greater involvement of the family

- Shorter periods of hospitalization

- Better follow - up

Non-hospital, community based residential care

- **Half-way homes**

- **Hostels**

- **Homes for the mentally ill**

- **Run by non-governmental organizations (NGOs)**

Planned discharges

- **Appropriate education for the family**

- **Frequent out-patient follow-up, following discharge**

- **Adequate supply of medications, free of charge**

Transformation of existing mental hospitals

- **Public Interest Litigation (PIL), in India**

- **Judicial activism**

- **Role of media advocacy**

- **Role of NGOs**

- **National Human Rights Commission (NHRC)**

Transformation of existing mental hospitals

- **Changes in admission policies**

- **Opening new wards – short stay wards, family wards**

- **Starting daily out patient services, emergency services, extension (out reach) services and rehabilitation programmes**

- **Starting various types of training programmes**

Transformation of existing mental hospitals

- **Government mental hospital, Bangalore to National Institute of Mental Health and Neurosciences (NIMHANS)**

- **Delhi mental hospital to Institute of Human Behaviour and Allied Sciences (IHBAS)**

- **Ranchi mental hospital to RINPAS**

- **Angoda mental hospital (Colombo) to National Institute of Mental Health**

Tele psychiatry

- **Ongoing pilot projects in India**

- **SCARF (Schizophrenia Research Forum), Chennai, experiences**

- **Mobile Tele psychiatry, Pudukkottai district, Tamil Nadu, India**

Integration of mental health in primary care

- **District mental health programme** and India's **National Mental Health Programme (NMHP)**

- Training of primary care personnel

- Motivational issues

- Administrative and managerial bottlenecks

Integration of mental health in primary care

- Mental health programme – **"horizontal" or "vertical"?** (in the context of **"Universal health coverage"**)

- New cadre of **"mental health care workers"?**

- **Funding issues**

Integration of mental health in primary care

- Severe shortage of **motivated and committed** mental health professionals

- Lack of effective leadership with adequate **"political skills"**

- Greater involvement/participation by **professional bodies**

Community based mental health services in LAMIC

- "Opinion, data, policy"

- Need for evaluation of community based interventions:
  cost-benefit, patient outcomes, overall effectiveness

- Overcoming implementation barriers

Consequences of deinstitutionalization in the West: any lessons for LAMIC?

Consequences of deinstitutionalization in the West:

- Mentally ill **homeless**

- Mentally ill in **jails and prisons**

- **"Virtual asylums"** in the community

- **(Re / Trans institutionalization?)**

- Emergency room "boarding"

- Law enforcement impacts **(police – front line mental health worker?)**

- Violent crime and homicides

Bus Therapy: A Problematic Practice in Psychiatry

Smita Das, MD[1]; Sebastien C. Fromont, MD[2]; Judith J. Prochaska, PhD[3]

STATEMENT
September 20, 2013

U.S. Mental Health Care is a Broken System

**Jeffrey Lieberman, MD,
President, American Psychiatric Association**

"Since 2009 there have been 21 mass shootings and the perpetrators in over half of these were suffering from or suspected to have a serious mental illness like schizophrenia, bipolar disorder and depression"

September 20 2013, APA

"Recent mass shootings in the US - ....symptoms of a seriously flawed mental health system"

Jeffrey Lieberman and Fuller Torrey "60 Minutes", CBS Television (30 September 2013)

"The tragic fact is that many people with serious mental illness are not receiving treatment in the community and **end up in jails and prisons**. *For example, the* **Cook County Jail in Chicago** *contains thousands of mentally ill individuals, and its director said that it is the* **largest mental health facility** *in the country"*

"60 Minutes", CBS Television
(30 September 2013

WITHIN
OUR
REACH

ENDING THE
MENTAL HEALTH CRISIS

ROSALYNN
CARTER

WITH
SUSAN K. GOLANT AND KATHRYN E. CADE

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Within our reach:
Ending the mental health crisis (2010)

- **Rosalynn Carter – Former First Lady of USA and a tireless advocate for people with mental disorders**

- **Describes a mental health system that continues to fail those in need**

- **Describes the current system which is totally in "shambles"**

Why are community psychiatry services in Australia doing it so hard?

Bruce Singh and David Castle
Medical Journal of Australia, 2005

Mental health in crisis: It's official

by CARMELO AMALFI

THE Barnett minority Liberal government is in damage control after a major review into mental health in WA identified a system in crisis.

The Liberals came into government in 2008 highly critical of Labor's mental health record, and promising to fix things. Three years later, there is little evidence of improvement.

Neurosurgeon Bryant Stokes' scathing 220-page review has sat on WA mental health minister Helen Morton's desk since September.

Reading it, one can understand her reluctance in letting it out of

• Minister Helen Morton—confident of a Budget injection

the leverage she needs to squeeze more mental health dollars out of Cabinet.

She says some of the recommendations are already being implemented.

Prof Stokes says frontline mental health staffing is half what it should be, noting there's been a 24 per cent surge in admissions in the past six years.

and, at times, places other patients at risk;

• communication must improve between mental health services and GPs; and,

• a need for more trained Aboriginal psychologists

Mental health system fails suicide risks

NEARLY half the 255 people in WA who killed themselves in 2009 had previously made contact with a mental health service.
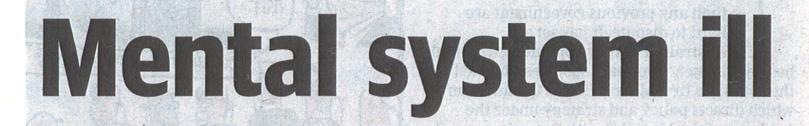
REPORTS
CARMELO AMALFI

Paul Murray

With an election looming, the pressure should be on the Government for mental health funding commitments

Phone 9482 3111 **Email** paul.murray@wanews.com.au

Mental system ill

t's more than just puzzling that Australians seem less concerned about the mistreatment of the mentally ill than they are about what happens to our sheep when they are exported overseas.
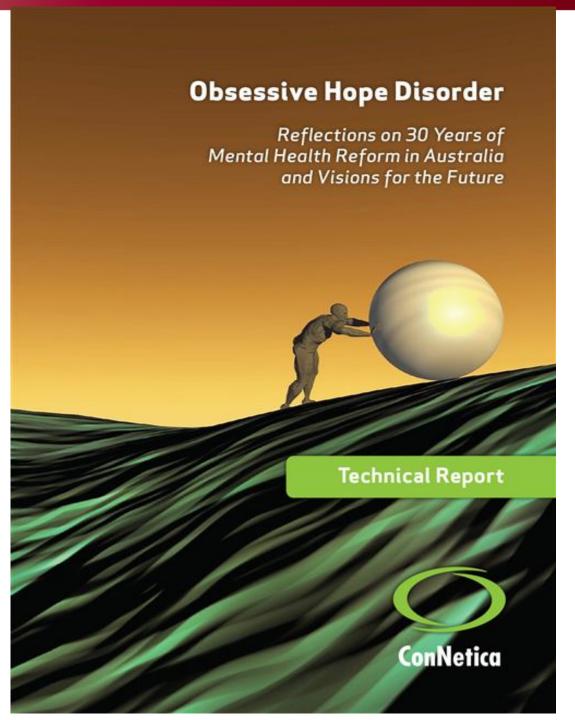
Bryant Stokes' damning report this week into the plight of local people with mental disorders will

things happen," Professor Stokes, a former Acting Commissioner of Health and chief medical officer, reported.

"Many mental health facilities act as if they work in a silo. Their relationships with each other are fragmented so that patients moving from one facility to another are frequently subjected

Only cold hard cash fixes that problem.

Even in the most sensitive area of the report's recommendations — acute issues and suicide prevention — the Government response is equivocal at best.

"Some recommendations have significant resource implications and require further

Obsessive Hope Disorder
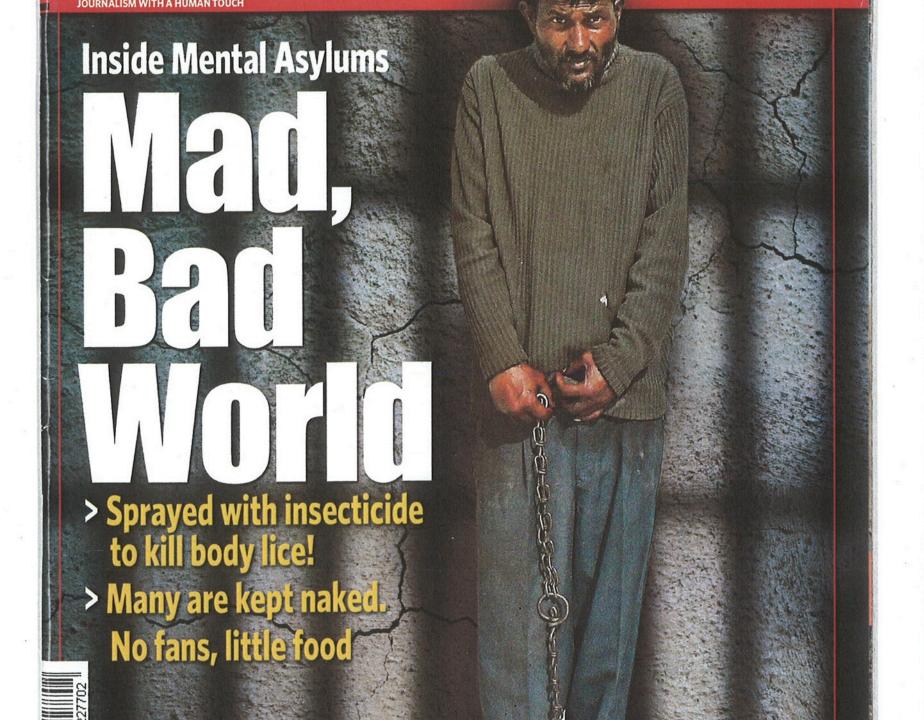
Mendoza et al, 2013

Reflections on 30 years of mental health reforms in Australia and visions for the future

- 30 years after **David Richmond's inquiry into health services for the psychiatrically ill** and developmentally disabled

- 20 years after **Brian Burdekin's inquiry into human rights of people with mental illness**

Indonesia's mentally ill rot in chains

Inside Mental Asylums

Mad, Bad World

> Sprayed with insecticide to kill body lice!

> Many are kept naked. No fans, little food

"Patients live in stinking barracks. The cells have no fans, even as the temperature soars over 40 degrees Celsius. Patients are forced to sleep on the dirty floor, as there are no beds in most wards"

(The Week, 2012)

Delivery of optimal **mental health care to all** is a complex issue.

The solutions too are **complex**

There are **multiple paths** to deinstitutionalization and organizing community services

- **When is deinstitutionalization successful?**

- **Diffusion of innovation is a major challenge**