

Mental Health in Nepal: A Comprehensive Overview of the Situation, Interventions, and Way Forward

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INTRODUCTION

Nepal, a landlocked Himalayan nation nestled between India and China, is renowned for its breathtaking landscapes, rich cultural heritage, and resilient people. With its diverse topography, ranging from the snow-capped peaks of the Himalayas to the fertile plains of the Terai, Nepal offers a unique combination of natural beauty and cultural diversity [1]. Mental disorders are conditions that affect a person's thoughts, feelings, and actions. They can cause distress or impairment in daily life and may involve changes in how a person thinks, feels, or behaves [2]. Mental health issues represent a significant global public health issue [3]. Across the globe, between 1990 and 2019, the proportion of mental illnesses to total disability-adjusted life years (DALYs) rose by 58%[4]. Countries with low and middle incomes, such as Nepal, are facing a greater number of mental health problems compared to wealthier nations. Evident suggests that the majority of people worldwide who suffer from mental disorders live in developing countries [5].

SITUATION OF MENTAL HEALTH ISSUES IN NEPAL

A recent national mental health survey conducted by the Nepal Health Research Council in 202 found that approximately 10% of Nepalese adults have experienced a mental health disorder at some point in their lives[6]. Another pilot study conducted in Nepal reported that 13% of Nepalese individuals suffer from mental health conditions, with suicide being the leading cause of death among women of childbearing age, particularly among those under 18[7]. Furthermore, nearly a quarter of Nepalese women older than 15 have experienced intimate partner violence, which has a substantial negative effect on their mental well-being [8]. A study revealed that approximately 3.9 million Nepalese adults, or 13.5% of the population, were affected by mental health conditions in 2019. This figure represents a slight increase from the 12.4% prevalence rate reported in 1990[4]. Mental health issues in Nepal are a significant concern, with challenges in governance, policy implementation, and service delivery [9]. The

decade-long internal conflict from 1996 to 2006, coupled with major disasters like the 2015 earthquake, Covid-19 pandemic, high unemployment, significant emigration, domestic violence, excessive alcohol consumption, and pervasive poverty, may have contributed to the prevalence of mental health issues in Nepal[10-13]. In 2019, approximately 3.9 million Nepalese adults were affected by mental health conditions, where, major depressive disorder and anxiety disorder were the most common, with around 1.1 million and 0.9 million individuals suffering from these conditions, respectively [4]. Despite contributing to the national economy, labor migration has had a significant negative impact on mental health, primarily due to family separation, deprivation, labor exploitation, forced labor, and human trafficking [14,15].

ONGOING INTERVENTIONS AND CHALLENGES

Nepal has demonstrated its commitment to mental health by implementing several initiatives: The Community Mental Health Care Package was introduced in 2017, the Standard Treatment Protocol for mental health in primary care was established, and training modules for medical officers and health assistants were developed to boost care capacity. Consequently, a comprehensive range of psychotropic medications, such as antipsychotics, antidepressants, anxiolytics, mood stabilizers, and antiepileptics, is now accessible at all healthcare levels throughout the country [16-18].

The part on intervention initiatives is particularly critical in understanding the progress and the hurdles in mental health care provision in the country. Community mental health services were first introduced in Nepal in the 1980s by the United Mission to Nepal [7]. The adoption of the National Mental Health Policy in 1997 marked a significant step towards acknowledging and addressing mental health issues in Nepal [19]. However, despite this early recognition, the implementation of the policy has been sluggish and uneven. Evidences suggest that

the execution of this policy suffers from several critical issues such as inadequate funding, a limited workforce specialized in mental health, and a concentration of services in urban centers which leaves rural areas significantly underserved [19,20]. The challenges in governance, policy implementation, and service delivery underscore the systemic issues that impede the effective management of mental health services in Nepal[21]. These challenges are further complicated by Nepal's vulnerability to natural disasters and past civil conflicts, which have both direct and indirect impacts on the nation's mental health needs [9]. Nepal's mental health services are hindered by systemic problems in governance, policy implementation, and service delivery [20]. Mental health problems are often viewed in a more isolated manner than physical problems and remain stigmatized in many societies, leading to treatment delays that can result in severe outcomes [22]. Stigma and misconceptions about mental illness persist, with many attributing it to supernatural causes [23]. Nepal, like many low-income and middle-income countries, grapples with significant disparities in healthcare access and quality, which are particularly pronounced in the realm of mental health services [24].

WAY FORWARD

To effectively address mental health challenges in Nepal, several strategic measures are necessary.

Increasing funding and integrating mental health services into the primary healthcare system are essential to make these services more accessible, especially in rural and underserved areas. This approach ensures broader coverage and supports the community's holistic health needs. Second, strengthening the mental health workforce is crucial. This can be achieved by expanding training for current healthcare workers and utilizing task-shifting strategies to non-specialists, which helps to alleviate the burden on mental health professionals and enhances service reach. Similarly, combating the stigma associated with mental health is vital. Public awareness campaigns and educational programs should be employed to shift societal attitudes, making it easier for individuals to seek help. Additionally, leveraging technology like telemedicine could improve access to mental health resources, particularly in remote regions. Collaboration among government bodies, NGOs, and international partners will be pivotal in advancing these initiatives, ensuring comprehensive and inclusive mental health care in Nepal. To address these challenges, Nepal needs to implement public policies favoring mental health, train healthcare professionals, promote healthy lifestyles, and increase community interventions.

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