## Commentary

In the letter to editor, Shrivastava *et al.* highlight the challenges facing provision of accessible mental health services universally and how the Comprehensive Mental Health Plan could be a game-changer in this regard. The 66th World Health Assembly adopted the comprehensive mental health action plan 2013–2020 on May 27, 2013 which aims to address the global burden of mental disorders. It was formulated after a rigorous and pain staking process that involved all the stakeholders in different sectors. The action plan is conceptually and strategically linked with the other plan documents of World Health Organization (WHO) including the famous Mental Health Gap Action Programme. This action plan would complement the existing policy documents

related to mental health. This action plan is the first in the history of WHO to recognize officially the importance of mental health and call for commitment from member nations to ensure provision of mental health care services for all.

Of the four objectives stated in the action plan, provision of a comprehensive, integrated, and responsive mental health service in community-based settings seems to the core objective. Similarly, of the six cross-cutting principles of the plan, universal health coverage and a multisectoral approach seem to be the key principles guiding the plan. Importance of respecting the human rights of mentally ill is adequately emphasized in line with the recent

trend. Provision of services goes beyond provision of psychotropic medication to provide vocational, housing, employment, and educational services as part of a broader biopsychosocial framework.<sup>[3]</sup> The document calls for an effective implementation across all the member nations. Proposed actions for the member nations include developing appropriate policies as required and adequate stakeholder collaboration is emphasized.

So, what really makes the document a pragmatic one? Provision of both process and outcome indicators that are achievable, measurable, and feasible really set apart this action plan. For example, by the year 2020, 80% of the nations are expected to have a mental health policy/plan and coverage for severe mental disorders needs to have increased by 20%. The suicide rate needs to have reduced by 10% during the same period. [4] These are realistic targets that are not utopian in nature. The assumptions and rationale behind each target are provided and are based on painstakingly gathered evidence and extensive consultations involving various stakeholders.

However, implementation of this action plan despite seemingly modest targets will require tremendous effort and political will apart from scarce resources for mental health to rely upon. Concerted effort from stakeholders with a multi-disciplinary collaboration along with involvement of local leadership can play a major role in achieving the targets as envisaged in the action plan. In resource-scarce nations, even these targets may seem daunting initially! It would be advisable if the individual member states can break down the targets to mini-targets that need to be achieved in 2–3 year periods with a periodic review and reappraisal to ensure the 2020 targets actually achieved.

The other attractive feature of this document, in my opinion, is the provision of various options for implementation for each of the actions provided. For example, the plan for "service reorganization and expanded coverage" may include developing a phased and budgeted plan for closing long-stay psychiatric institutions, building of community-based mental health services, integrating mental health into disease-specific programs such as HIV/AIDS, and engaging family members with experience as peer workers. Similarly, the plan for an "integrated and responsive care" may include encouraging health workers to link with people in educational or employment sector, recovery-oriented care, adequate psychoeducational services, empowering and involving people with mental disorders, and appropriate crisis-intervention measures. Hence, the plan can be adapted to suit the local and regional context where it is implemented. [3] This indeed makes it a truly global vision document that can be implemented across diverse settings, each with its own unique challenges in addition to the generic challenges facing delivery of mental health services.

## Sundar Gnanavel

International Training Fellow, CAMHS Unit, St. Mary's Hospital, Kettering, Northamptonshire, United Kingdom

## Address for correspondence:

Dr. Sundar Gnanavel, International Training Fellow, CAMHS Unit, St. Mary's Hospital, Kettering, Northamptonshire, United Kingdom. E-mail: sundar221103@yahoo.com

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