<div align="center">**Viewpoint**</div>

Learning Mental Health Education: Experiences from a short-term course

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Abstract

This paper describes a distinctive one-month certification programme in Mental Health Education. This was designed, conceptualised and executed at the National Institute of Mental Health and Neuro Sciences (NIMHANS), a multidisciplinary tertiary care hospital and training institute for mental health and neurosciences in India. Learning about a topic's integral to mental health education, was facilitated by experts in the field of mental health through diverse and novel methodologies. This brief report details the first-hand experiences of the three participants and their perspectives on the content and format of the programme and its potential applications. The implications for developing public health strategies to enhance mental health literacy in the community are discussed.

Key words: Mental Health Education; Public Health; Training Mental Health, Mental Health Policy, India.

Impact statement

A one-month Certificate Course in Mental Health Education was conceptualized, and executed by the Department of Mental Health Education, National Institute of Mental Health and Neuro Sciences (NIMHANS), a multidisciplinary tertiary care hospital and training institute for mental health and neurosciences in India. This was planned in response to the contextual realities of the shortage of trained mental practitioners and inadequate mental health literacy in the country. The course aimed to enhance the knowledge and skills of course participants and train them as partners in mental health promotion and education initiatives in the community. dissemination initiatives to disseminate aims is to contribute to the pool of evidence towards

Introduction

Mental illness is a major public health issue and many persons with psychiatric disorders remain untreated. The National Mental Health Survey of India 2015-2016 conducted by NIMHANS [1] estimated the mental morbidity of individuals above the age of 18 years as 10.6% and the life time prevalence as 13.7%. An estimated 150 million people need mental health intervention at some point of their life time, including both acute and chronic care, in both the urban and rural populations. [1] The treatment gap is a greater concern in developing nations [2] and is compounded by poor community awareness, stigma and discrimination, along with limited mental health care resources and inadequacies in the integration of service delivery systems. These factors limit the accessibility to timely mental health care in India, a populous country with socio-economic inequalities and limited resources.

Mental health can be enhanced by effective public health interventions. Promoting awareness about prevalence of mental health disorders may improve help seeking behaviours[3]. Hence, it becomes imperative to train the mass about mental health education, especially the lay people in order to develop an expertise in mental health education so that they become the torchbearers of mental health domain in the community and help people in need.

Certificate Course Rationale

The World Health Organization [4] defines health education as consciously constructed opportunities for learning which are designed to facilitate changes in behavior towards a pre-determined health goal. Mental Health education alongside other key public health interventions can be used to promote the mental health of individuals, families, communities and societies.

Health promotion has been described as a product of health education and healthy public policy (Tones and Tilford,2001) [5]. Capability, has been defined by Stephenson (1998) [6], as an integration of knowledge, skills, personal qualities and understanding used appropriately and effectively. This is becoming an increasingly important concept in mental health practice (Sainsbury Centre for Mental Health, 2001)[7]. Being able to mould a lay person or health professional to progress to becoming a capable mental health educator requires a training platform exclusive to Mental Health Education.

The National Institute of Mental Health and Neurosciences (NIMHANS) is a premiere medical institution in Bangalore, a city in South India. The Department of Mental Health Education, NIMHANS aims to promote the health and wellbeing of individuals and communities by developing health education and training materials that will help in meeting one of the key goals of the National Mental Health Plan; enhancing the understanding of mental health in the country[8] A one-month full-time certification program in Mental Health Education from Department of Mental Health Education, NIMHANS conducted in the month of September 2016 represented a step towards this objective. This is the first of the kind of course in India. The course was targeted to intake individuals with Master's degree in health and behavioural sciences, with a merit-based selection process. The three participants, who successfully completed the intensive program, were from diverse backgrounds, and had post graduate degrees in public health, psychology and rehabilitation counselling

Program: Conduct, application, and effectiveness.

Conduct:

The one-month structured certification program in Mental Health education was a six day per week program. The course structure included a wide range of topics integral to Mental Health and education. These topics were facilitated by experts from multidisciplinary domains including clinical psychology, behavioral sciences, psychiatry, epidemiology, public health, psychiatric rehabilitation, psychiatric social work, yogic science and a team from a non-governmental organization working in the field of Mental Health. The course facilitators used their practical experiences of working with users and carers in mental health services to address the learning objectives of the different modules. The early sessions were tightly structured, divided between mini-lectures and group exercises and encouraged strong learner participation. Both individual and group-based homework tasks were planned for each week. Sessions starting the week that followed would begin with detailed discussion and feedback from these homework tasks. All

modules were interwoven throughout with practical illustrations and examples from the service user and provider experiences.

The one-month course pedagogy aimed to increase the potential for multidisciplinary collaborative learning. Collaborative learning is defined by Gokhale (1995)[9] as "an instruction method in which learners at various performance levels work together in small groups toward a common goal"; the active exchange of ideas within small groups increases interest and promotes critical thinking (Gokhale, 1995) [9].

Applications of the Mental Health Education Course:

The main objective of the Mental Health Education Certificate Course was address mental health needs of the population by developing innovative strategies for encouraging active community participation.

 This is done through-

a) Addressing stigma and discrimination towards mental illness: Service users, the beneficiaries of mental health services at times opt out to seek service completely or partially by not fully participating in the process of recovery. One of the important reasons for being stigma; trying to avoid being labelled mentally ill. Hence to understand what one goes through during this difficult phase of illness, course participants read the autobiographies, blogs, published first person accounts of people with mental health vulnerabilities and their caregivers, anchored in an Indian context. Following the intense reading, a brainstorming discussion with domain experts helped the participants gain a deeper understanding of the intensity of the deep-rooted stigma attached to mental health along with its related practices that are followed in the society which happen to be quite discriminating. The key learning of the entire activity was to ingrain in the fabric of mental health promotion, collaborative working between mental health professionals and service users, and their significant others, thereby challenging traditional ways of thinking and working by attempting to break down any real or perceived barriers. This provided the basis for good practices by valuing and learning from everyone's (user, caregiver and professional) experience and perspectives.

b) Including non-mental health professionals non-stigmatized, experiential dissemination of mental health education:

Mental health should be recognized as everybody's business. This can broaden the scope and reach of mental health interventions, decrease stigma and position mental health more positively. This approach legitimizes and welcomes the inclusion of the voices of persons with mental illness and their caregivers in providing feedback and planning of mental health services [10]. To strengthen this learning objective, the course participants reviewed a book "Sepia leaves" [11], written by a caregiver about his mother who was diagnosed with schizophrenia. The book

highlights the stigma attached to the illness, and its direct and indirect impact on the family, friends, and on society. The book intended to illuminate the challenges of living with and caring for a mentally ill family member and provides the opportunity to "see beyond the disorder to glimpse the lives of people touched by schizophrenia" [12]. The course participants also had the opportunity for experiential learning, through a face to face interaction session with Amandeep Sandhu, the author of the book. This session facilitated the asking of questions on various aspects related to the book, with a deeper understanding of the author's emotional journey, interactions with mental health practitioners, and the ongoing process of coping.

In another assignment, course participants read two chapters from "A Book of Light" (Pinto, 2016) [13]; *Some Questions for a Brother* (written by Ina Puri) and *Abhimanyu, our son* (written by Madhusudan Srinivas). The first story highlighted the strong bond between a brother and sister and the complex emotions and memories that surfaced in the aftermath of the brother's suicide. The second chapter is an experience of the father living with a son with Autism. Both the chapters were very thoughtfully chosen to make the participants understand that impact of mental illness is not limited to the person with the disorder, but reflects in the lives of family and friends.   Participants also discussed the power of self-expression through the process of writing about difficult encounters with mental illness; both its cathartic and educative functions. Personal accounts can change perceptions about mental illness in society and such narratives have only emerged more recently in India. The immersive assignments involving the two books, also helped to rekindle conversations on mental health by increasing the understanding of what family members and caregivers of persons with mental illness need from a mental health education point of view.

c) Filling the lacunae of lack of sufficient trained mental health service providers:

 Mental Health First Aid training courses aim to teach community members first-aid skills to support people with mental health problems. A recent meta-analytic review (Morgan, Ross & Reayley, 2018) [14], demonstrated the effectiveness of this training in increasing mental health literacy, reducing stigma and increasing confidence and intentions to provide mental health first aid. During the certificate course, the participants were trained to facilitate Mental Health First Aid sessions held at the Department of Mental Health Education. They were involved in a three hour intensive training session and supported by domain experts. Facilitating the First Aid training equipped the course participants with the skills, knowledge and confidence to recognize and respond to mental health problems, and further work towards increasing community awareness and skills. The participants also developed a 10-minute interactive role play video on

Mental Health first Aid for the lay public. titled *Prayatn, A step to mental health first aid* The word 'Prayatn' has its root origin in the Sanskrit word 'Prayatna' meaning 'effort'. The development of this video, to enhance mental health first aid knowledge for responding to crisis situations, assumed greater significance in the view of the theme for the World Mental Health Day 2016; "Mental Health First Aid for All."

d) Demystifying media representation of mental illness: Media representations of mental illness can have a powerful role in educating and influencing the public. Participants were provided with snippets of video clippings from Indian media that portrayed mental illness in myriad forms. The participants were made to explore if these media representations were appropriate and sensitive. People with mental illness were often portrayed in the media in ways that reinforced negative stereotyping. These unjust portrayals can shape the public perception of those with mental illness as people to be feared and ignored. The course participants were asked to do a creative group presentation comparing the stereotypical or negative and the accurate or balanced ways in which mental illness has been represented in Indian media. This presentation was enriched by discussions about the portrayal of mental illnesses in the Indian film industry (Bollywood) vis-a vis Hollywood cinema. Bhugra (2006) [15] concluded that Indian cinema needs to be more enlightened in this aspect. This would be possible only when efforts are made to ensure limit the negative portrayals which exacerbate inaccurate perceptions of mental illness.

Program Strengths and Effectiveness: The entire program had a multifaceted training approach which provided participants with varied opportunities to contemplate individually and work in small groups alongside having brainstorming discussions. Being given the liberty to use one's own ideas to develop teaching materials, share original views and discuss on various unique exercises made the course very effective. Participants had diverse learning opportunities from various stakeholders, including mental health experts, service user and caregivers. The development of a video on Mental Health First Aid, highlighted the importance of developing accessible resources for the public. This intensive creative process enhanced the confidence and skills of course participants and demonstrated the need to scale-up mental health education. The video, which is available online, was a tangible outcome of the certificate course. Overall, the certificate course met its goals to a large extent; sustained mental health promotion initiatives by participants after course completion are aspirational outcomes. One key suggested area of modification is to provide participants with experience of field-based activities which would give a practical flavour to the entire program. It is also worthwhile to consider increasing the duration of the course to three months, thereby providing the participants more in-depth knowledge about the core areas of Mental Health Education.

Implications for theory, policy, and/or practice:

India's Mental health Policy [8], is a dynamic policy, all-encompassing and growing with regular review and feedback from people. and is central to addressing mental health problems of India. The policy, not only works towards mental health interventions for disease and disability prevention, but also takes into account the need for all stakeholders to work synergistically and achieve policy goals. The Mental Health Care Act[16], a progressive right based one, aims to protect rights of persons with mental illness and promote their access to mental health care. This illustrates how mental health care is emerging as an area of priority concern in India. The Act also mentions about the measures to be taken to address the human resource requirements of mental health services in the country by planning, developing and implementing educational and training programmes in collaboration with institutions of higher education and training. The need to improve the skills of the available human resources to better address the needs of persons with mental illness, has also been emphasised.

Conclusion

Mental health promotion requires intersectoral collaboration, i.e. participation and investments by sectors outside mental health. Within the working framework of National Mental Health policy of India [8], the role of mental health education in addressing mental health issues of our country becomes pivotal. Mental health educators can interact with other key other stakeholders at various levels and play a pivotal role in bridging the gap between various stakeholders. Given the challenges of an overburdened mental health care set up in developing countries with limited human resources, a long term training program, with a post-graduate fellowship in Mental Health Education is recommended.

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