

## Khyber Pakhtunkhwa and Mental Health

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“Mental disorder” means mental illness, mental impairment, personality disorder, and any other disorder or disability of mind [1]. Mental health is significantly worse in underdeveloped countries as there is a lack of comprehensive and well-coordinated preventative, promotion, curative, and rehabilitative health services. Due to stigmatization of mental illness, there is lack of access to avail services. One out of every ten children suffer from a diagnosable mental health illness in the world. This percentage has risen by 68 percent in the previous ten years [2]. Fewer than half of them were treated effectively at the time, and the remainder developed severe depression and were unable to lead a normal healthy life. In Pakistan 10 - 66% of the general population suffers from mild to moderate while 0.1% from severe mental illnesses [3]. The Khyber Pakhtunkhwa Mental Health act was approved in 2017 and pledges for the establishment of Mental Health Authority and psychiatric facilities in the province to strengthen treatment, care, management and matters of the mentally disable patients and their families [1].

After 1947, Pakistan continued to operate under the Lunacy Act of 1912, which had been in force in British India. The act's focused on imprisonment rather than treatment of the people with mental disorders, whereas with advancements in therapy, particularly the introduction of psychiatric drugs, new law was required, therefore in 1992, the government suggested new mental health laws [4]. The Mental Health Ordinance of 2001, however, did not displace the Lunacy Act of 1912 until 2001 and resembled the Mental Health Act of 1983 UK. The Sindh Mental Health Ordinance 2013 has been endorsed by the Sindh Assembly [5]. The Punjab government enacted the Punjab Mental Health Act in 2014, which is a minor amendment of the 2001 ordinance [6]. The Sindh Mental Health Ordinance 2013 has been endorsed by the Sindh Assembly [5]. The Punjab government enacted the Punjab Mental Health Act in 2014 [6].

### Khyber Pakhtunkhwa

Pakistan has come a long way since its independence in 1947, when there were only three psychiatric hospitals in the country. Today around 20 medical colleges support psychiatric wards. There are approximately 4,100 beds in the public and private sector and about 342 practicing psychiatrists. Total number of human resources working per 87/100,000 population is which includes approx. 342 psychiatrists, 25782 non specialized medical doctors, 13643 nurses, 478 psychologists, 3145 social workers, 22 occupational therapists, 102597 other mental health workers i.e. auxiliary staff etc [7]. Mental Health forms an essential part of undergraduate medical training. National Mental Health Program, developed in 1986, aims at achieving universal provision of mental health and substance-abuse services by incorporating them into primary health care. Via this programmed, primary-care physicians are being trained, and training manuals are being developed for lady health visitors. In addition, junior psychiatrists are being trained in community mental health.

There is still need to further improve mental health by raising awareness regarding various mental health disorders, rights of the patients, responsibilities and duties of the families and overall, the society. Related taboos need to be reduced through electronic print

and digital media and knowledge amongst family and acquaintances. Policy makers along with experts need to sit and to make such policies and laws that will benefit the mentally challenged people. Spiritual healers to be taken into the loop as they are the first contact of the mentally ill patients. There is a need to start a state-of-the-art stigma and discrimination free Mental health care clinical services where research is mandatory. New academics should be introduced to promote mental health specialties in medical universities.

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