

The Institution of “The PEMA” for Mental Health Care for Bhutan

The Pema Secretariat

Background

Mental health is a complex and multi-faceted issue, with a wide range of determinants, including genetics, environmental factors, social determinants, and access to resources and support. Maintaining both physical and mental health is crucial for overall well-being. Although physical and mental health are interlinked and can greatly impact each other, physical health is accorded more importance, and the significance of mental health is still being undervalued.¹ Addressing both aspects equally is essential for a healthy and balanced lifestyle.

Addressing mental health requires a comprehensive and collaborative approach that involves individuals, families, communities, and governments. Reducing the burden of mental disorders and enhancing mental health services require a whole-of-society approach that addresses the root causes of mental health problems, and provides access to effective prevention and treatment services (WHO, 2008).

In Bhutan, there are several ongoing efforts, with different stakeholders promoting mental health and well-being, based on their mandates. These initiatives provide opportunities to build on and re-orient efforts towards achieving the goal of delivering timely, reliable, and effective interventions. However, a consolidated approach with a clear and shared vision was needed to build a comprehensive mental health system. This article delves deeper into the mental health situation and the role of The PEMA in creating a society that promotes the well-being of all Bhutanese.

Current Scenario of Mental Health in the Country

The burden of mental health in our country is significant, with anxiety and depression accounting for around 55% of the total mental health related cases (Ministry of Health, 2022). There were 4,131 cases of anxiety disorders

¹ Poor physical health can lead to mental health problems, while poor mental health can contribute to physical health issues, specifically the non-communicable diseases (Sample, 2019).

and 2,410 reported cases of depression in 2021. Mental disorders related to alcohol and substance abuse are also on the rise. In addition, the increase in suicide incidences also needs appropriate and effective interventions.

Currently, basic mental health services in Bhutan are integrated into general health care services. This enables people to access mental health services at all health facilities, close to where people live, and have their recovery monitored. Integrated mental health care is ensured by incorporating basic mental health care modules in the pre-service training of health workers at the Faculty of Nursing and Public Health. Similarly, all General Duty Medical Officers (GDMOs) are provided attachment with the Psychiatric Department of Jigme Dorji Wangchuck National Referral Hospital (JDWNRH) to orient and ensure context-based psychiatric care. Clinical counsellors are recruited in 10 prioritised dzongkhags, and gradually all hospitals will have at least one clinical counsellor to provide psychotherapy services and preventive interventions.

Similarly, more than 170 school guidance counsellors are placed in schools by the Ministry of Education and Skills Development to ensure access to counselling services in schools. There are some dedicated civil society organisations in the country working toward providing rehabilitation services, creating awareness, and mobilising psychosocial services. However, specialised psychiatric services are provided in the psychiatric department, JDWNRH, by national psychiatrists, clinical counsellors, speech therapists, occupational therapists, trained nurses, addiction professionals, and other health workers.

The provision of mental health services in a country requires a collaborative effort of various sectors, including education, health, and civil society organisations. The spread of mental health mandates across different agencies, without proper coordination, can lead to fragmentation, duplication, and even conflict of interest. This can result in a loss of focus and a weakened referral ecosystem for individuals seeking mental health services. The need for a lead agency for mental health in a country was felt to provide a single point of focus for planning, implementing, and monitoring mental health policies and services. Hence, The PEMA Secretariat was instituted to streamline efforts, promote coordination and collaboration, and ensure that the resources are being used effectively and efficiently.

The Institution of The PEMA and its Mandates

The establishment of “The PEMA” as a nodal agency for mental health in Bhutan stemmed from the visionary aspiration of Her Majesty The Gyaltsuen. The PEMA manifests Her Majesty’s noblest intentions for the well-being and happiness of every citizen. This institution is dedicated to care for mental health and well-being, with the ultimate goal of ensuring and promoting the mental well-being of all Bhutanese. In doing so, The PEMA is committed to prioritising mental health as a critical component of overall well-being, through the implementation of effective strategies and initiatives.

The PEMA has two major wings, namely The PEMA Secretariat and The PEMA Center. The PEMA Center will be a 60-bed hospital for psychiatry services. It will be an apex centre for mental health services in the country, with a crucial role in standardising mental health services across all health centres and monitoring the quality of services provided. This will help to ensure that individuals receive high-quality care regardless of their location.

Additionally, the Center will act as a guiding centre for clinical research, training, and capacity building, as well as providing a forum for stakeholder engagement and advocacy. The centre will work in close collaboration with The PEMA Secretariat and other stakeholders to develop and implement effective policies and programmes to enhance mental health services.

The PEMA Secretariat, on the other hand, spearheads mental health planning, standardisation, consolidation, and re-orientation of strategies in ensuring effective mental health services in the country, both functionally and structurally. This dedicated office plays a pivotal role in developing a national mental health plan, setting standards for mental health services, and consolidating mental health services across different sectors.

It also oversees the implementation, monitoring, and evaluation of mental health related plans and activities. The secretariat also plays a vital role in the coordination of mental health services across different stakeholders, including the government, private sector, civil society organisations, and international partners, to ensure effective and efficient mental health prevention and response.

The PEMA Board, comprising representatives of various agencies, chaired by the Health Minister, guides the PEMA Secretariat to enhance mental health prevention, enhancing response, and facilitating restorative and re-integration services. The PEMA's work is grounded in the principle of equity and continuum of care approach, with a particular focus on reaching marginalised and vulnerable populations to ensure that no one is left behind.

The PEMA is guided by four core mandates. First, a proactive and responsive mental health service delivery network that focuses on strengthening integrated mental health care to address mental health issues early on and provide comprehensive and efficient care.

Second, an enabling mental health system will be developed, that includes policy, review of laws, and an information system to facilitate effective and efficient management and monitoring of mental health services. Third, multisectoral collaboration and coordination will be strengthened to ensure that multiple stakeholders are engaged in promoting mental health, and that there is a proper referral mechanism for comprehensive services.

Finally, active advocacy and prevention are necessary to reduce stigma and discrimination associated with mental health issues, and promote the development of innovative approaches to support the mental health needs of all individuals. These four mandates will ensure the achievement of the overarching goal of good mental health for all individuals.

As our society and the challenges we face continue to evolve, it is essential that our approach to mental health also needs to be revamped. In addition to addressing the immediate needs of individuals, it is equally important to have a long-term vision that looks beyond the present needs and gaps. By investing in research, innovation, and training, we can ensure that our mental health systems are equipped to meet the needs of the future. A long-term vision will help us develop new approaches to mental health, anticipate emerging challenges, and proactively address issues before they become crises. With a comprehensive and forward-thinking approach, we can build a mental health system that is responsive, effective, and sustainable for generations to come.

The Way Forward and Mental Health Care for Bhutan

It is essential to have both short-term and long-term plans to ensure health and mental well-being. Short-term plans can focus on immediate needs, such as current gaps in services and prevention, while long-term plans aim to promote sustainable and resilient mental health practices. A well-planned strategy can help identify potential gaps and prioritise areas of intervention for better mental health outcomes. With a comprehensive approach that includes prevention, treatment, and recovery, mental health services can achieve better outcomes and improve the overall quality of life for individuals and communities.

The PEMA will leverage on a continuum of care approach for addressing mental health issues that involves a comprehensive and integrated approach through prevention, response, rehabilitation, and re-integration. Prevention efforts are critical in reducing the incidence of mental health disorders, by addressing risk factors such as stigma, trauma, crisis interventions and discrimination.

Response efforts involve early detection and intervention to minimise the impact of mental health disorders, while rehabilitation and re-integration focus on restoring the individual's functioning and quality of life.

The continuum of care approach is especially important in different stages of life, such as childhood, adolescence, adulthood, and later life, as mental health needs vary across these stages. By adopting a continuum of care approach, individuals can receive the necessary support and care to achieve optimal mental health outcomes. By ensuring that mental health services are available at each stage of life, individuals are more likely to receive the care they need when they need it. Moreover, the continuum of care approach helps to prevent more severe mental health problems from developing, and reduces the overall burden of mental illness on individuals, families, and the society as a whole.

The PEMA Secretariat under The PEMA has three divisions and support services to ensure the mental well-being in continuum of care approach through prevention, response, and restorative and rehabilitative services for all age groups.

Prevention and Engagement Division

It comprises prevention, research and development, and media and promotion section. All sections will cumulatively focus on comprehensive prevention planning and implementation. Reducing stigma and discrimination, early identification, enhancing treatment services, conducting research, developing an information system, formulation of strategy, review of legislations, and leveraging technology for promotion are priorities of the division, with the ultimate aim to reduce incidence and mental health burden.

The division has taken significant steps towards promoting mental health and well-being of people. Leveraging on technology, various social media handles are used to promote mental health and well-being and also to enhance service seeking behaviour of people. Additionally, mental health services in the Psychiatry Department, JDWNRH, have been enhanced through refurbishment of infrastructure, allocation of required equipment and recruiting required professionals to ensure that people receive quality services.

As part of ongoing efforts to improve mental health outcomes for our community, this division has devised a proactive prevention strategy focused on early identification through well-being screening in schools. This approach will enable early identification, and address potential mental health issues early on. Additionally, a strong emphasis is placed on enhancing integrated mental health care for community based care.

It will also support the global move for de-institutionalisation of mental disorders. Apart from ensuring access to mental health, this approach will also empower communities and provide community engagement platforms to reduce stigma and discrimination for people affected by mental health issues. Moreover, a human resource development plan has been developed to ensure adequate mental health professionals in the country.

Prevention and response to bullying is crucial for promoting mental health and well-being in individuals. The PEMA, in coordination with Ministry of Education and Skill Development, has oriented all school administrators and counsellors on implementation of an “anti-bullying guideline” to prevent bullying and respond to bullying incidences in schools.

For evidenced-based planning and interventions, development of an integrated information system is an ongoing effort of the division. Research and studies have been prioritised for evidence generation through a national level survey to assess prevalence of mental health issues and specific research to enhance service delivery.

Further, a situational analysis was conducted to identify gaps in prevention efforts and assess mental health services in the country. Accordingly, a National Multisectoral Mental Health Strategy is under formulation. It will be an overarching guiding document for mental health related interventions for the country for consolidation of services for effective and efficient service delivery. Further, it will also encompass the plans to equip mental health needs with adequate infrastructure and appropriate professionals. As a preventive effort, policies, legislations, and guidelines will be reviewed and formulated to ensure a conducive environment for people through patient- centric mental health care.

Response Service Division

This division provides response and initiates treatment services through the helpline services, case management, protection and postvention services. The focus is on effectively responding to crisis situations for mental health needs, violence, self-harm incidences and mobilising suicide postvention services. Part of the response also includes initiation of treatment services and referral to appropriate services through appropriate referral pathway.

Firstly, a dedicated helpline for mental health was established on 10th October, 2022, coinciding with the World Mental Health Day. It is managed by professional counsellors and they have been providing counselling services, instant mental health related information, and facilitating referral for mental health services. Providing comprehensive mental health services, crisis intervention and response services to individuals who are experiencing a mental health crisis is crucial. A comprehensive and robust response mechanism for mental health crisis will be developed. It needs proactive and harmonised referral pathways to provide timely psychosocial support.

Restorative and Rehabilitative Division

This division will initiate and ensure effective treatment and rehabilitation services, re-integration services, and community outreach and aftercare services. Providing rehabilitation services for persons with substance use disorders (SUD) with supporting re-integration, and building community support systems and aftercare services to ensure recovery of affected individuals are core priorities of this division.

The division has introduced hospital-based substance use disorder treatment and care services in JDWNRH and two regional referral hospitals. It is an evidence-based programme for patients with low to moderate SUD and highly motivated patients who cannot commit to long-term residential treatment. The service is being accessed by a significant number of people affected by substance use issues. This intervention will be scaled up in phases to ensure accessible and affordable treatment services.

Addiction is a complex and chronic relapsing brain disease and an adequately equipped rehabilitation centre will ensure supportive services can help individuals achieve lasting recovery. A framework for the establishment of a National Drug Treatment and Rehabilitation Centre has been developed. It will cater to the widespread substance use issues that affect individuals and families across the country.

References

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