Emerald

## CAPACITY-BUILDING TO STRENGTHEN THE MENTAL HEALTH SYSTEM

"Although several landmark international movements and publications have recently served to improve the knowledge base on how to address the escalating burden of mental disorders, information is still scarce on how to translate this knowledge into practice at the health system level."
The EMERALD Project

INTRODUCTION

- Starting from the premise **"no health without mental health"**, a health system cannot be considered to function properly if it is unable to protect and to provide the basic health rights and needs of the sick and the vulnerable, including the mentally ill.
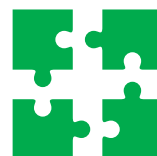
- Scaling up access to mental health care, promoting stakeholder **capacity-building, and achieving a higher level of service user and caregiver (SU/CG) involvement** all have the potential to make health systems more responsive to the needs of the people they are meant to serve, and will benefit patients directly by increasing the likelihood of recovery.

OBJECTIVES

The EMERALD consortium conducted a study in India with the following aims:

- Implement, extend and evaluate models of best practice in developing mental health systems and research capacity in India.

- Pioneer innovative strategies to engage policy-makers, providing them with research targeted to maximise evidence-based planning and decision-making for general and mental health system strengthening.

- Empower, equip and facilitate the involvement of service users and their caregivers to support mental health system strengthening in India.

APPROACH & METHODOLOGY

Based on capacity-building needs assessments, **strategies and materials have been developed for capacity-building and service user involvement** in the Indian mental health system.

Mixed-method evaluation to assess the effectiveness of capacity-building and strategies for SU/CG involvement for Indian mental health system strengthening.

RESULTS

The situation analysis carried out in India showed **an urgent need for capacity-building of all stakeholders in the Indian mental health system.** Among the gaps in the Indian mental health system that act as barriers to SU/CG involvement and stakeholder capacity-building are:
- Treatment gap
- Stigma gap
- Information and political gap

Overcoming barriers to involvement is seen as a process, requiring a stepwise progression from assessing and meeting unmet needs, followed by empowerment and mobilization of service users.
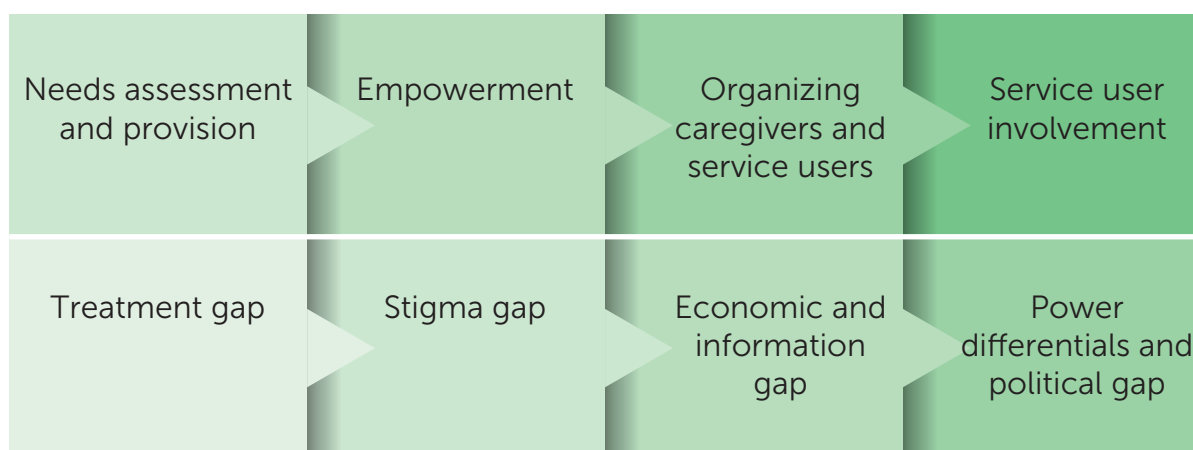
IMPLICATIONS AND RECOMENDATIONS

Stakeholder capacity-building is a prerequisite for scaling up access to quality mental health care.

Societal and system-level barriers must be addressed in order to facilitate the involvement of service users and caregivers in strengthening the Indian mental health system.

There is a need to shift from a largely 'provider-centric' to a more **'user-centric'** model of mental health care for a meaningful user involvement in the mental health system.

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Needs assessment and provision	Empowerment	Organizing caregivers and service users	Service user involvement
Treatment gap	Stigma gap	Economic and information gap	Power differentials and political gap

Service user involvement pathway bridging the mental health system gaps

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