



The Mental Health Care Bill - II

[Click Here](#) to read the provisions of the bill.

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Why Mental Health Care Bill?

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 - **150 million Indians** need treatment for mental illness but nearly 80-90% receive no treatment (treatment gap).
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 - We spend less than 1% of the public health budget on mental health although mental health problems constitute nearly **13% of the health burden**.
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 - Instead of viewing persons with mental illness as objects of fear, pity and charity, the Mental Health Care Bill **recognises them as citizens** with health rights, including the right to quality mental health care.
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 - It makes provision for **universal access to a range of mental health-care services** in the community, at the district level, through the public health system.
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 - The Bill also makes it compulsory for insurance companies to include mental illness cover in medical insurance policies.
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 - These steps will ensure more people get treatment and reduce the treatment gap.

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What are the two most empowering provisions in the bill?

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- **Advance Directive (AD):** It allows **all citizens**, not just persons with mental illness, to state (when they are well) their treatment choices in the event a future mental illness.

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- This is not a compulsory requirement.

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- No one will be left untreated because they did not write an AD, but many will recognise its (AD's) importance, especially those who are wary of unscrupulous medical practices in mental health.

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- **Nominated Representative (NR):** The Bill also has provisions for individuals to appoint a NR to **make decisions on their behalf** when they are unwell and cannot make decisions for themselves.

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- This too is not a compulsory requirement and if no such appointment is made, family members are considered as default NR.

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- Both provisions give a **measure of control back to individuals** with mental illness, particularly women, allowing them to actively participate in decision-making about their care and treatment.

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Source: The Hindu

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