



THE QUESTION OF DIGNITY

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World mental health day is a trade mark of World Federation for mental health¹. Dignity in mental health is the assigned theme for this year. This is also the theme of WHO for this year's mental health day². The theme assigned to mental health day this year disillusion us from the mirage that we have created for our selves. The mirage that shows that humanity has achieved its highest actualized state after passing through the long trail of time in which centuries of centuries have elapsed. The civilization that is born after the collective creative efforts of all these centuries since the man's first day on earth is that we need to endorse dignity for the ailing humanity by observing days. The disillusionment has struck me as a slap in face; ailing humanity in demanding a bit of dignity in 21st century.

Dignity is defined as "the innate right of a being to be valued, respected, and to receive ethical treatment³. The concept can be traced back to the teachings of Jesus Christ. In the teachings of Catholic Church, dignity for common man was endorsed because man was thought to be created on the image of God⁴. As a philosophical notion, it was presented by Kant as, "Dignity is to be able to regard one's own existence as having worth, all people must apply this recognition of worth equally to others⁵. In medical sciences concept was introduced by Jacobson in early 21 century as essential and central to human bioethics^{6,7}. Hypocratic oath has a clause against the discrimination of gender and economic status of the patient but otherwise it is more concerned with professional ethics of the physicians than the dignity of the patients⁸; the declaration of Helsinki has stressed upon the dignity of patients in conduction of research, as for treatment is concerned, it remains silent⁹.

Dignity is also been a right given to disabled persons as per the first principle of the UN convention on the right of persons with disabilities¹⁰ and these disabilities off course include disability from mental health as well. Most of the nations in the world have agreed upon it when it comes to vowing for restoration of dignity for the ailing man¹¹. It is also included in the WHO's Comprehensive Mental Health Action Plan 2013-2020¹² and Alma-Ata declaration's Millennium Development Goals¹³. In spite all this, when it comes to the implementation of these vows, results are nullified. Though we have gone too far in scientific discoveries and have a developed civilization that had vowed a lot for the dignity of the inhabitant of this earth who have still not discovered them selves as human beings with innate right of dignity.

There are too many aspects of mental health that demand the attention in concern with dignity; some of these areas are highlighted in the World Mental Health Day report of World federation for Mental Health¹⁴.

Casting a bird's eye upon the indigenous scenario the basic issues related to the dignity of mental health can be divided into the issues of access and issues of awareness. The issues of access may further be divided into following;

- 1) Lack of access
- 2) Fragmented access
- 3) Denied access
- 4) Quality compromised access

There are many remote areas where no mental health professionals are available. People living there have scarce means to reach far situated facilities; these areas are lacking access to mental health facilities. Fragmented access is when there are gaps in continuity of treatment due to multiple reasons or when patients can only access a few of the services needed to them and rest of the services are out of the reach of patients. The Mental Health services available to the majority of the people in our country have lack of access or fragmented access but their dignity demand full and complete access to mental health services.

Denied access is when mental health services are available but they are denied by the patients or their families due to a number of reasons like stigma or etc. Quality compromise access is also a major issue. The areas where access is available no matter fragmented have a compromise quality; this deterioration in the quality of mental health services is multifaceted and has thousands of reasons behind it. On the part of professionals it may present in seeing patients in haste due to heavy workload. It may also present in lapses of communication that further includes ignored importance of rapport building with patients, failure in providing proper informational care to the patients and their families, in careless omissions of psycho education and family education and compromise on the professional values like empathy, unconditional positive regard and non judgmental listening. Some of the reasons behind this source of quality deterioration are amendable but rest are non amendable. The amendable are discussed later. Another major area where compromised quality of mental health services is obvious is

environmental issues that include overcrowded wards where there are lapses of proper sitting places for the caregivers, few dirty washrooms and tired and crossed paramedic staff, who is poorly trained in communication skills and professional ethics. One of the most important aspect of access issue are the diverse ethno cultural segments of society that do not share mainstream languages spoken and understood by the professional mental health community. The wars and anarchy in many places have compelled people to seek refuge in other areas within the country like Internally Displaced persons (IDPs) and out side the country as refugees. Both of these IDPs and refugees face ethno cultural and linguistic disparities. For IDPs and refugees, this disparity is far more important since they already are a vulnerable group as for mental health is concerned. These groups faces gender, social, cultural, ethnic, linguistic and religious persecutions and discriminations. They also experience nutritional deprivation, loss of identity, home, family, jobs, country, and social status. They also experience migratory grief because of these losses. This group demands dignity at the most. The pictures of Sharbat Gul and Ailan Alkurdi have been a strong advocate of the voice of refugees to earn them recognition and acceptance world wide.

Lack of awareness is equally important a hindrances in way to dignity as the issues of access. The awareness (discussed later) also plays a role in access issue; in knowledge and recognition of the need for mental health treatment, in lack of awareness about right places to take the patient to, and in lacking courage to overcome the stigma related to mental illness and face their socio cultural surroundings for taking step towards the distant treatment. Fragmented access also, in part, is a product of lack of awareness about the importance of compliance, course of illness, indicators of changing medication needs of the patient and importance of follow up visits. Denied access is also due to lack of awareness against misconceptions concerning mental disorders and options to treat them. Stigma and fear of being discriminated also put their shares in denied access.

Awareness issues are also multifaceted; these may include lack of awareness, stigma attached to mental disorders, discrimination of mentally disturbed persons and dehumanizing treatment done with such patients in the society.

The call for mental health professional is subjected to only two conditions; one is commencement of involuntary or seemingly involuntary actions on the part of the patient and second is the high degree of dangerousness in the actions of the patient. Rest of the problems goes unattended by the family. The treatment (not off course medical treatment) given to the patient is dehumanizing; they are chained, tied up with ropes, restrained in separate places, denied of their basic human rights, and are abused verbally, physically, emotionally and at times sexually as well.

The ways to deal with such problems are broad ways awareness campaigns, social inclusion, rehabilitation and preventive measures.

- The awareness campaign can fight stigma and discrimination with the help of local media, radio, TV, internet, newspapers and magazines. For these campaigns inviting celebrities with mental health problems and publicizing true success stories of mentally ill patients may have been effective tools.
- Knowledge and public awareness strategies can be exchanged between nations who are dealing successfully with such problems.
- Stigma and burden of disease may also be decreased by rebranding of mentally disorders. Stigma is attached to name of

mental disorder, the rebrand would be free of it, it takes decades to get the stigma attached to new things.

- Removing this information and myths about the mental disorders and available treatment modalities.
- An early educational course may also be added to curriculum to ensure awareness and combat stigma. This will also help in early recognition and better treatment for mental disorders.
- Promotional seminars should also be conducted in the main stream educational institutions. These courses and seminars may also include material to avoid discrimination, prejudice, social inequality and teaching of dignity as a basic human right for all the citizens towards all the individuals in order to promote preventions.
- Besides this, there should be first aid training programs for public to help them recognize mental health problems. Such a programs has been started and successfully run in Australia named as ALGEE¹⁵ where:
 - A is for Approach access and assist person in crisis.
 - L is for Listen non judgmentally
 - G is Give support and information
 - E is for Encourage appropriate professional help
 - E is for Encourage other supporters

Society and mental health professional should promote support groups for patients with innovations. These support groups should include recent research findings, mental health legislation, different treatment approaches, current events regarding the issue and general attitude of public in their agendas.

There is something that lies as the liability of state. This includes legislation for mental health issues, expending the circle of mental health services to remote areas for easy and continues access and the state should also motivate itself for building residential rehabilitation institutions for chronic patients who are not claimed by anyone and wonder in the streets. When it comes to rehabilitation and social inclusion of the chronic patients, state may give tax wavers for the employers who employ stable chronic patients under supervision at less complicated tasks.

Local governments, institutional administrations, principals, and medical superintendents should also acknowledge the services of mental health professionals in the society and accept their role and recommendations in planning for citizens and patients in order to restore the dignity of the psychiatric patients and mental health profession in the community. If mental health professionals would be dealt in dignified way in the society the stigma would eventually be decreased regarding mental disorders and psychiatric patients.

Mental Health professionals in their selves need to restore the dignity by taking following steps:

- Act as role models in practicing dignity towards the citizens, patients and their own selves.
- Personal growth of the mental health professionals is very important; they need to be hatched out of their shells of egoism, self centeredness, self recommendation, and self projection.
- Ensure Reciprocal respect between provider and recipient of mental health care and also exercise the same mutually between members of professional community.
- Provide person centered care in which identity of the patient is kept intact, though scarcity of professionals makes it difficult to

manage the workload for such professional values but the professionals need to be creative in managing the load by making coordinating team work, skill mix of team members and shared tasking with the care givers of the patient.

- Be sensitive to their therapeutic burnout in order to provide quality mental health care to avoid damaging the dignity of the patients and off course their own as well.
- Empathy is very important for patient in maintaining the dignity and providing motivation for changing behavior. Mental Health professionals require to learn and excel in therapeutic values like empathy, providence of unconditional positive regard to the patients and their families, and non judgmental listening of the patients.

The societal change is crystallized after a number of steady efforts on the part of the elements of change and off course the inertia in the society resists it. The secret of the art of making change lies in the perseveration and commitment. As a mental health professional if any of us manages to convince his or her own self in carrying own the fight to eliminate the threats to the dignity of the profession, eventually dignity will win one day. I long for the day to come soon, InshaAllah.

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