

SAFP over view for mental health work 2014

SAFP has linked with stakeholders involved in mental health. SAFP team has been researching secondary resources available in and outside the country. SAFP has created



with human dignity.

family support groups and has been involved in various discourses on legislative changes within the country. Its research on improving understanding on the practical application of UN CRPD in India is ongoing and last but not the least improve understanding on what do persons affected and their families want in terms of support and services.

To make a strategic difference, SAFP explores solutions in the area of supporting persons affected by mental disorders lead more productive lives

We work to

- Find ways to cope with mental health issues in community and neighborhood settings.
- Create support services for concerned individuals and their families by orienting youth and women volunteers to address mental health issues
- Generate discourse on the concept of rehabilitation in mental illness.

Gaps exist in understanding the issues from the perspectives of those affected and their families. The gap in this understanding is reflected in the policies, strategies and approach to work be it rural or urban areas, cutting across all economic classes. These are most often developed on an understanding developed from individual case profiles and anecdotal evidences.

The current strategies have a strong medical approach. While this is crucial, the families are keen that a non-medical resolution also be worked upon to integrate those affected and their families in a manner that brings them dignity, improved quality of life and long-term security. There is a need to innovate and create opportunities to achieve the highest levels of wellness and dignity. It will be much more than helping individuals just stay well. In most instances the current approach is to silence them through medication so that the families and those around can get on with their lives and in extreme cases abandoned on the roads or in institutions.

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Our aim is to create opportunities to try out new ways to redefine care and rehabilitation strategies and initiatives. This will be done through a pilot programme comprising of a center with outreach services in close partnership with those affected and other primary stakeholders (medical fraternity that includes psychiatrists, general physician, nutritionist, alternative health therapists, sports physicians and tie ups with local services where the family lives; social development and rehabilitation professionals; prospective employers, HR networks and mentors).

This center is planned in a place called Thelessary in Kerela, This centre will evolve into a resource and referral center in time. The SAFP team in Kerela will innovate and create opportunities to build on the strengths of the individual/family. It will focus on developing education programs for the patients and their family members on illness management (including diagnosis); increase the functional capacity as much as possible of those concerned to reclaim their lives and support them to develop methods towards integration into healthy and productive living. For the patient and the related family the pilot centre will encourage the formation of an informed, proactive self-help group. Later - this group will support and initiate other community based family groups in different parts of the city. These will promote the role of the patients and the families as partners in care and rehabilitation by promoting family education on the illness and its dynamics, its day-to-day and long-term management and related coping strategies for support and care leading to better quality of life.

In Delhi SAFP has begun Mental health awareness work through its community outreach activities and youth initiatives.