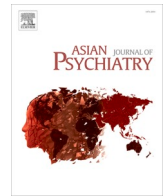




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Letter to the Editor

National helpline for mental health during COVID-19 pandemic in India: New opportunity and challenges ahead



Dear Editor,

A wide treatment gap for common mental disorders (CMDs) exists in India due to stigma, human resource, and financial constraints. (Gautham et al., 2020) The recently published National Crime Records Bureau (NCRB) data suggest that 139,123 Indians have committed suicide in 2019, which is alarming and indicative of immediate attention from policymakers and government (NCRB, 2020). Further, it is anticipated that mental health issues and suicides may surge in India during the COVID-19 pandemic due to its psychological and socio-economic impacts (Ransing et al., 2020; Shoib et al., 2020; Tandon, 2020). Therefore, there is an urgent need to improve the access to mental health across the country.

Given these pressing considerations, the Ministry of Social Justice and Empowerment, Govt of India has launched the first multi-language, national, toll-free helpline for mental health issues (Table 1), called 'Kiran (1800-599-0019)' on Sep 7, 2020, to offer immediate help to people with mental health issues and to aid suicide prevention efforts (Ministry of Social Justice and Empowerment, 2020). Though, some non-government organizations (such as i-call, Asara), state government (Sikkim-Police), National Institute of Mental health Neurosciences (NIMHANS), and Municipal corporation (through the Psychiatry department of Medical college) do provide services for crisis intervention. (The Indian Express, 2019). Kiran has unique features such as collaboration among the government and professional organizations (e.g. Indian Psychiatric Society), staged models of care, the inclusion of all states and union territories through regional centers than the previous ones.

A total of 1328 volunteer mental health professionals, including 660 clinical/rehabilitation psychologists and 668 psychiatrists from 25 centers and 75 experts, will handle 300 callers per hour (Ministry of Social Justice and Empowerment, 2020). The support will be given in a hierarchical 3-step mechanism. The calling persons will be connected to the location-based center for a preliminary assessment. Next, they will contact clinical psychologists/psychiatrists for rehabilitation as per the standard protocol. Subsequently, follow-up care and support will be provided (Ministry of Social Justice and Empowerment, 2020). The services will cover a wide range of mental health issues and crises/emergencies, including suicidal ideation.

This step looks promising to improve access to mental health care, though a small one to achieve the Sustainable Development Goals in 2030, i.e., reduction in suicide death rate by one-third and the treatment gap for CMDs (United Nations, 2020). During this COVID-19 pandemic, online consultation for mental health is getting popularized, and having a dedicated national mental health helpline during this period may be more helpful (Ifdil et al., 2020). Follow-up services are currently proposed to be offered by volunteer mental health professionals;

nevertheless, in the long term, funding will determine the sustainability of services. Several other concerns, such as training and competency of the counselors, maintaining their motivation in absence of incentives, rapid turn-over of personnel, barriers in referral pathways, quality of counseling delivered, sustainability of the initiatives, privacy, and confidentiality need immediate attention. Also, the digital divide, illiteracy, and poverty are some barriers that can impact access to these services (Malathesh et al., 2020).

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Declaration of Competing Interest

The authors declare that they have no conflict of interest.

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Table 1
National Mental Health Helpline in Nutshell.

Implementing agency /Institutes	Ministry of Social Justice & Empowerment, Government of India through designated national institutes
Collaborating Agencies	1 Indian Association of Clinical Psychologists 2 Indian Psychiatric Society 3 Indian Psychiatric Social Workers Association
Target Population	Any individual/Family/organizations who need such services across the country
Area of Focus	<ul style="list-style-type: none"> • Sensitizing on COVID-19 and Mental Health Issues • Psychological First-aid for mental health conditions • Specific Assessment, first aid, and referral Protocols for <ol style="list-style-type: none"> 1 Suicide 2 Depression 3 Acute stress reaction 4 Grief 5 Post-traumatic stress disorder
Human Resources	<ul style="list-style-type: none"> • First-Line Help Staff: 25 Centers, dedicated mental health professionals (n = 3 at each center) of National Institutes, Regional centers, Composite regional centers staff (re-deployed by existing centers), 8 h rotation duty to manage 24-h services, no additional honorarium • Second-Line Help: Clinical/Rehabilitation Psychologists (n = 640): Volunteers other than above mentioned Clinical/Rehabilitation Psychologists through their professional organization, 2–12 hours per day, Not being paid. • Second-Line Help-Psychiatrist (n = 668): Volunteers through their professional organization, 2–12 hours per day, Not being paid
Operational Guidelines	<p>Stage 1: Calls attended by the designated staff (First-Line Help) who will collect the basic information, conduct assessment, offer online guidance/counseling as per protocol (mild to moderate illness), conduct follow-up session, refer to stage 2 services (for help, severe illness, non-responding) as per the resource protocol.</p> <p>Stage 2: Transfer of call for first-line help staff to psychologists/psychiatrists (Second-Line Help). Assessment and guidance as per professional experience</p> <p>Stage 3: As per need, the caller will be facilitated to avail the services of MHPs or any other Forums as per their professional experiences</p> <p>Follow-up and Support services: The caller will be given an appointment time to connect her/him MHPs through the call-back system</p> <p>Number of calls managed by the toll-free number,</p>
Outcome Indicators	Number of MHPs linked with a helpline, Number of referrals, number of follow up services

Abbreviations: MHPs- Mental Health professionals.

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