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Contours of mental health and wellness in urban slums: Explorations and beyond

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Abstract

Mental Health has been a well explored area in terms of its theoretical interpretations since time immemorial. It has been a focal point of discussion particularly after the looming uncertainty that pandemics like COVID-19 has brought to the psycho-social fabric of countries across the world. The contours of its exploration has been well expanded in urban communities but its access remains to the affording sections of society. The marginalized population, particularly in urban slums face distinct challenges which needs a new kaleidoscopic view through which mental health support is looked upon. This article explores the untapped contours of access to mental health, particularly by urban slums and how efforts of NGOs make a difference in extending mental health support and thereby ensuring overall well-being of the lives in urban slums.

Keywords: Mental health, well-being, mental health services, psycho-social well-being, mental wellness, world health organization, mental health intervention, mental health promotion

Introduction

In recent years, the relevance of mental health has taken center stage in our collective consciousness like never before. The evolving landscape of our modern world, with its unique challenges and opportunities, has ushered in a new era of awareness and recognition regarding the paramount importance of mental well-being.

The evolution of our understanding of mental health is deeply rooted in historical contexts, where its definition and significance have evolved over time. Although references to mental health as a state can be traced back before the 20th century, it wasn't until 1946 that technical references to mental health as a distinct field emerged. This was marked by the establishment of the World Health Organization (WHO) during the International Health Conference in New York, alongside the founding of a Mental Health Association in London. Prior to this, mentions of "mental hygiene" were prevalent, dating back to as early as 1843, highlighting the link between mental and physical well-being.

The formation of the WHO in 1948 and the subsequent International Congress on Mental Health in London marked significant milestones in the recognition of mental health as a global concern. During the second session of the WHO's Expert Committee on Mental Health in 1950, "mental health" and "mental hygiene" were defined, emphasizing their roles in fostering and maintaining well-being amidst biological and social influences. Mental health was described as a condition enabling individuals to navigate instinctive drives, maintain relationships, and engage in positive societal changes (World Health Organization, 1951) ^[23]. Despite these early efforts, a universally accepted definition of mental health as a discipline remained elusive. Lexicographic sources such as Dorland's Medical Dictionary and Campbell's Dictionary of Psychiatry provided varying interpretations, with mental health sometimes synonymous with mental hygiene or denoting a state of psychological well-being. However, over time, mental health began to be recognized as a distinct discipline, evident in its incorporation into health ministries, university departments, and academic curricula, often replacing mental hygiene altogether.

Moreover, the relationship between mental health and psychiatry, the medical specialty focused on mental disorders, has been subject to debate and clarification. While psychiatry deals specifically with diagnosing and treating mental illnesses, mental health is increasingly viewed as a broader concept that encompasses not only the absence of illness but also the promotion of psychological well-being.

Efforts have been made to delineate mental health as a separate entity from psychiatry, although some argue for an integrated approach where mental health serves as an overarching framework inclusive of psychiatric practices. The history of mental health reveals a gradual evolution from early notions of mental hygiene to the establishment of mental health as a distinct discipline. This journey has been characterized by efforts to define its scope, clarify its relationship with psychiatry, and emphasize its importance in promoting overall well-being on a global scale.

Moving from the broader discussion on the history of mental health worldwide, it's crucial to understand how mental health has evolved specifically in India. India's story is unique, shaped by its diverse cultures and historical influences. Exploring the history of mental health in India helps us understand how traditional healing practices, colonial legacies, and modern healthcare have all contributed to the current landscape of mental wellness in the country.

The evolution of India's healthcare system, particularly in the realm of mental health, can be traced through a series of significant developments spanning from the early 20th century to the early 21st century. Prior to independence, the 1935 Government of India Act granted provinces autonomy over health activities, coinciding with the establishment and growth of mental health services, including the emergence of mental hospitals and the inception of the first general hospital psychiatric unit.

Following independence in 1947, the focus on mental health intensified with the development of psychotropic medications in the 1950s and the establishment of the All India Institute of Mental Health (AIIMH) in Bangalore. Throughout the subsequent Five-Year Plans, there was a notable allocation of funds towards health, leading to the proliferation of specialized mental health units and training programs for psychiatric professionals. Initiatives in the post-independence era also included piloting models for mental health care extension, such as community psychiatry units and projects aimed at extending mental health services to rural areas.

The initiation of the National Mental Health Programme (NMHP) in 1982 marked a significant milestone, with specific programs like the Bellary program addressing mental health needs in targeted regions. The 1990s saw a surge in NGO involvement in mental health care and the enactment of legislation, such as the Persons with Disability Act in 1994, signalling growing recognition of mental health rights. Subsequent years saw the implementation and re-strategizing of the NMHP and the District Mental Health Programme (DMHP), with a focus on enhancing access to mental health care, particularly in rural areas. These efforts were underscored by increased budget allocations and the introduction of community health workers under initiatives like the National Rural Health Mission. Overall, this timeline illustrates a shift towards community-based mental health care and policy-driven programs aimed at addressing the diverse mental health needs of India's population. (Van Ginneken, Jain, & Patel, 2014) ^[21]

At this point, it is significant to note that the mental health initiatives recorded in India are majorly with respect to the treatment and maintenance of mental illnesses and clinical psychiatric conditions. The more common mental health issues stemming from factors other than physiology, that are largely responsible for affecting quality of life and

individual well-being, have remained neglected. This is a matter of concern as it showcases that the inclusion of mental health in the definition of a healthy lifestyle remains beyond reach, either due to lack of awareness or negative notions related to seeking help for one's mental health.

While the dialogue on mental health is gaining some momentum in India, one of the imperative considerations is to explore the factors that contribute towards the understanding of mental health in the context of urban slums. Urban areas are rapidly expanding around the world, with more people moving into cities than ever before. This trend is set to persist, particularly in developing nations, notably in Africa and Asia, where urban growth is most rapid, often encompassing impoverished communities. It was estimated that between 30% to 60% of urban dwellers worldwide inhabited slums, enduring deplorable living conditions marked by a lack of essential services already, back in 2001 Caracci & Mezzich, 2001 ^[6].

Within the contemporary urban landscape, stark disparities emerge: cities serve as hubs of economic activity, cultural vibrancy, and access to various amenities, yet they also serve as glaring reminders of inequality, injustice, and social upheaval, characterized by crime, violence, and widespread poverty. In essence, along with opportunities, cities also bring challenges, especially for mental health. The influence of urban living on mental health presents itself in various ways. While cities can provide a range of mental health resources, such as healthcare facilities and recreational areas, which may alleviate psychological distress, the pressures of urban life, exacerbated by socioeconomic inequalities and environmental stressors, can lead to negative mental health consequences. Additionally, the limited availability of accessible mental health services in urban areas can exacerbate the difficulties experienced by individuals dealing with mental health issues.

Urban slums are commonly characterized by overcrowding, inadequate sanitation, and limited essential services which represents some of the most challenging living conditions faced by marginalized populations. Recently, attention has been drawn towards the critical relevance of mental health in these densely populated and economically disadvantaged urban areas. In the context of urban slums, the struggle for basic amenities, substandard living conditions, rampant poverty, and social exclusion, all contribute to an environment that is inherently stressful and conducive to mental health issues. Additionally, the residents of urban slums often face the burden of societal stigma and discrimination, further exacerbating their mental health challenges. The COVID-19 pandemic has also contributed towards accentuating the relevance of mental health in urban slums.

Mental health conditions have emerged as a growing concern, significantly contributing to the global burden of disease. Neuropsychiatric disorders, including depression, alcohol and substance abuse, and psychoses, contribute to what is known as disability-adjusted life-years (DALYs). This contribution is expected to rise globally, projected to increase from 13.5% in 2005 to 14.4% by 2030 (Gruebner, *et al.*, 2012) ^[8].

In wealthier countries, whether operating under market-driven or state-planned healthcare systems, mental healthcare services have often been criticized. In developed countries, mental health services often benefit from greater financial resources and infrastructure compared to those in

developing nations. However, despite these advantages, there remain significant challenges, mental healthcare systems have been criticized for inefficiencies, high costs, and inadequate involvement of service users and their families in decision-making processes. Additionally, disparities in access to quality care persist, particularly for marginalized groups. While there may be more comprehensive mental health services available, there is still a gap between the outcomes prioritized by these systems and the actual needs of individuals seeking support (Sasidharan, White, Mezzina, & Gishoma, 2018) ^[18].

Presently, a staggering majority of individuals grappling with severe mental illness in developing countries remain without effective treatment, with only one in five, receiving assistance. This underscores the critical imperative to address this significant disparity in treatment provision. Shifting the focus of specialized mental health practitioners, including psychiatrists and psychologists, from merely delivering services to actively participating in the design and management of mental health programs could contribute to expanding access. Additionally, enhancing the clinical capabilities of primary health care (PHC) workers and ensuring the supervision and quality control of mental health services are essential strategies for scaling up mental health interventions in these countries Luitel, *et al.*, 2015 ^[11].

Nations representing over 2 billion individuals globally allocate less than 1% of their overall public sector healthcare expenditures to mental health, with a significant portion of African countries falling into this bracket. Merely 51% of the global population in low-income nations have access to any form of community-based mental health services. While data on the utilization of mental health services remains scarce, it is estimated that at least 85% of individuals grappling with severe mental health issues in certain low-income countries go untreated within a 12-month timeframe McDaid, Knapp, & Raja, 2008 ^[13].

In developing countries, the prevalence of depression has reached alarming levels, nearly on par with malaria. Projections indicate that this figure could escalate to approximately 5% by 2030. However, the pressing issue of mental health often takes a back seat to other health challenges, particularly in rapidly urbanizing megacities of developing nations. In these urban centers, characterized by the growth of slums and unhealthy living conditions, mental health concerns can be overshadowed by a multitude of other pressing health problems.

These urban slums present a host of adverse conditions that can significantly impact the mental health of their inhabitants. High levels of environmental pollution, inadequate access to clean water and sanitation, overcrowding, insecurity of housing tenure, and the impermanence of housing structures all contribute to the precarious health of slum dwellers. In such environments, mental health challenges may go unaddressed or exacerbated due to the overwhelming focus on addressing immediate physical health and environmental concerns Gruebner, *et al.*, 2012 ^[8].

Addressing Mental Health in Urban Slums of India

Mental health in urban slum dwellers is influenced by a plethora of factors that may be environmental, economic and social in nature. These densely populated and economically disadvantaged areas are characterized by

challenging living conditions which include overcrowding, inadequate sanitation and limited access to essential services. Environmental stressors of this nature can contribute to the development of mental health issues among the residents. The struggle for basic amenities, such as clean water, sanitation facilities, and proper housing, adds to the burden faced by individuals living in urban slums. Substandard living conditions, often marked by poorly constructed housing and lack of adequate infrastructure, further compound the challenges faced by them. In addition, the stigma associated with living in a slum, coupled with discrimination based on socioeconomic status, ethnicity, or other factors lead to social exclusion and marginalization, which in turn contribute to the mental health challenges.

Addressing mental health in urban slums requires recognizing the fact that mental well-being is an integral part of overall health and quality of life. First and foremost, increasing access to mental health services within these marginalized communities is paramount. This can involve establishing community health centers or mobile clinics staffed with mental health professionals who understand the unique challenges faced by slum residents. Raising awareness about mental health and reducing stigma is essential to encourage individuals to seek help when needed. In a study conducted on mental health literacy among adolescent girls in an urban slum setting in India, findings pointed towards a “poor level of awareness regarding mental health problems and available help” Saraf, Chandra, Desai, Rao, & GN, 2018 ^[18].

Another survey related to mental health risk assessment in a selected urban slum of Delhi, India, concluded that large number of slum dwellers were at risk of mental illnesses which needed comprehensive mental health services Bhardwaj, Sharma, George, & Khan, 2012 ^[3].

The National Mental Health Survey of India, 2015-16 lists out the treatment gap for mental disorders which ranged between 70% and 92% for the different disorders. The list included common mental disorder (85%), severe mental disorder (73.6%), psychosis (75.5%), BPAD (70.4%), alcohol use disorder (86.3%) and tobacco use (91.8). In most of these cases, a government facility was the common source of support (Murthy, 2017) ^[15].

In Gujarat, there is a significant mental health burden, with an estimated 2.8 million adults affected by common and severe mental disorders at any given time. Each year, approximately 11,000 new cases of schizophrenia add to this burden, while the prevalence of severe mental disorders surpasses that of schizophrenia by more than four times, often accompanied by co-existing physical conditions. In response to this pressing need, there is a critical call to bolster mental health services across Gujarat. Presently, services predominantly focus on in-patient and out-patient care, with limited attention devoted to promotion, prevention, and rehabilitation efforts.

However, Gujarat faces a significant shortage of trained mental health professionals, posing a formidable challenge to adequately address mental health needs. As per the reports published in 2018, only 163 qualified psychiatrists and fewer than 50 clinical psychologists were then available, alongside a scarcity of trained psychiatric nurses despite the presence of 23 general nursing colleges, the accessibility of mental health professionals remained inadequate. Furthermore, the availability of other para-mental health professionals, such as trained social workers,

is also limited. Their involvement is deemed pivotal for the development and implementation of community-based and cost-effective interventions in the mental health sector. Nevertheless, the shortage of trained human resources obstructs intervention development across all levels and settings of care, hindering the adoption of multidisciplinary approaches aimed at enhancing the quality of mental health care delivery in Gujarat Punarbhava, 2018^[17].

Gujarat's geographical diversity, including the oldest plateau of land and the vast desert of Kutch, poses unique challenges, particularly with its susceptibility to natural disasters such as earthquakes and floods. Notably, the Cyclone of Kutch marked the initiation of psychosocial rehabilitation services following a disaster, setting a precedent for future interventions. The aftermath of the

major earthquake in 2000 prompted the development of mental health services through an ICMR project, resulting in a decrease in cases of PTSD. Presently, Gujarat boasts a well-organized Disaster Management cell to address such eventualities effectively.

Furthermore, the Mental Health Mission 2003 stands out as a pioneering state-level initiative, spearheaded by various stakeholders and funded by the Royal Netherlands Embassy. Under the leadership of IIM professor Ramesh Bhat, two years of extensive research and surveying of mental health systems culminated in a comprehensive MH report, culminating in the formulation of Gujarat's first-ever State Mental Health Policy in 2004, ahead of any other state or even the nation.

Table 1: Mental health support programs for mental health mission 2003

	Name of the project	Implementing organization
1	Training and Development Initiatives for Pilot Implementation	AMA, Ahmedabad
2	Rehabilitation of Patients with Schizophrenia	Sheth VS General Hospital, Ahmedabad
3	Rehabilitation in Hospital for Mental Health	Vardaan Foundation, Vadodara
4	Rehabilitation in a Daycare Centre	Shri Hatkesh Health Care Foundation, Junagadh
5	Integration of Mental Health into Community-based Rehabilitation Programme	BPA, Ahmedabad
6	Community-based Mental Health Care	AKHSI, Ahmedabad
7	Mental Health Care Initiatives in Tribal Areas	Trust for Reaching the Unreached, Vadodara
8	Community-based Interventions and Role of Traditional Health Practitioners	BAIF Foundation, Bharuch
9	Promoting Socialization in Community	Manav Kalyan Trust, Khedbrahma
10	Mental Health Care for Adolescents	HM Patel Centre for Medical Care and Education, Anand
11	Addressing Mental Health Issues of Street Children	Vikas Jyot Trust, Vadodara
12	Mental Health Care Initiatives in Slum Areas	BCC, Vadodara
13	Psychosocial Aspects of Marital Disharmony	AWAG, Ahmedabad
14	Enabling Environment in Mental Health: Patient-centred Ethico-legal Perspective	Bapu Trust, Pune

AMA – Ahmedabad Management Association; BPA – Blind People's Association; AKHSI – Aga Khan Health Service; India; BCC – Baroda Citizens Council; AWAG – Ahmedabad Women's Action Group

Source: Mehta, Shah, Vankar, Chauhan, & Bakre, 2018^[14]

Subsequently, fourteen Mental Health Support Programs (Table 1) were launched with research funding from the Royal Netherlands Embassy, New Delhi, and implemented through community-based organizations (CBOs) and non-governmental organizations (NGOs). Many of these projects, including the one initiated by Baroda Citizens Council (BCC), remain ongoing even after a decade, catering to diverse populations such as adults, the elderly, women, children, and adolescents, and addressing specific mental health needs. The initial groundwork laid by these projects serves as a valuable resource for other CBOs to adopt and adapt in their own initiatives Mehta, Shah, Vankar, Chauhan, & Bakre, 2018) ^[14].

Theoretical Interpretation of Mental Wellness Programs

The World Health Organization (WHO) defines mental health as a state of well-being characterized by an individual's ability to realize their potential, cope with life's stresses, work productively, and contribute to their community (World Health Organization, 2014 ^[24]). Over time, various theories have emerged to explain the etiology of mental health issues.

Biological Perspective:

This perspective, heavily influenced by neuroscience, posits that human behaviour and mental states are determined by brain structure and function. Genetic factors play a significant role in shaping an individual's temperament and vulnerability to mental illness. Treatment often involves pharmacological interventions aimed at modulating brain activity.

Psychological Perspective:

Psychodynamic models, pioneered by Sigmund Freud, attribute mental illness to unresolved childhood traumas or anxieties residing in the unconscious mind. While traditional psychoanalytic theories have evolved, modern approaches emphasize understanding and addressing mental conflicts rather than solely analyzing them. Criticisms of psychodynamic theories have led to the emergence of behavioural and cognitive explanations, as well as humanistic and existential approaches, which emphasize individual agency and unique subjective experiences.

Social Perspective:

This perspective considers individual behaviour within the broader context of social systems, particularly family dynamics. A systemic perspective views individuals as interconnected with their families and society, recognizing the influence of social relationships and environments on mental health. Social work interventions often adopt a systemic approach, addressing both individual and familial factors to promote mental well-being Ow & Poon, 2020 ^[16]. Overall, theories of mental health offer diverse frameworks for understanding the complexities of human behaviour and mental illness, highlighting the multifaceted nature of mental health phenomena. The integration of insights from these theoretical perspectives into mental wellness programs enables a holistic approach to promoting mental well-being. By addressing biological, psychological, and social factors, the mental wellness program effectively works towards supporting individuals in realizing their potential, coping with life's challenges, and contributing to their communities.

Role of Non-Governmental Organizations/ Civil Society Organizations / Voluntary Organizations

Non-Governmental Organizations (NGOs) play a very significant role in addressing the mental health challenges within urban slums. Their presence and initiatives are often a lifeline for marginalized communities struggling with mental health issues. NGOs bridge the gap in mental health services by providing accessible and culturally sensitive support. They offer counselling, awareness campaigns, and psychoeducation programs that empower residents to recognize and address their mental health needs. Additionally, NGOs often work in collaboration with local communities, building trust and reducing the stigma associated with seeking help for mental health concerns. They contribute significantly to the well-being and resilience of individuals, advocating for systematic changes and fostering a compassionate and supportive environment where mental health is prioritized and understood as an essential part of overall health. A study specifies that although NGOs may not have the same level of reach as government agencies, their strength lies in the quality of care they provide and their dedication to reaching out to marginalized groups. This dedication gives them a unique advantage in their efforts Thara & Patel, 2010 ^[20].

Another factor that works in the favour of NGOs supporting mental health is that they often do not face the same stigma associated with seeking help from psychiatric facilities, particularly for common mental disorders. The group of individuals sometimes referred to as the "worried well", who fall between those with severe and persistent mental illnesses and those who are considered mentally healthy, could potentially benefit the most from these NGOs. This is because they may face barriers in accessing specialized mental healthcare services Visalakshi, *et al.*, 2023 ^[22].

In Gujarat, while there exists more than 1500 NGOs, only a limited few are actively engaged in the mental health sector. Many of these organizations primarily focus on general health, maternal and child care, social welfare, and disabilities, with mental health being a relatively underrepresented area. One of the main challenges faced by these NGOs is the lack of capacity and expertise in mental health interventions. Limited skills and knowledge hinder their ability to conceptualize and propose effective projects in this field. Additionally, inadequate understanding of legal issues pertaining to mental health, along with apprehensions regarding provisions of the Mental Health Act, further inhibit the development of community-based interventions by NGOs.

To enhance the role of NGOs in addressing mental health needs in Gujarat, it is crucial to strengthen their capacity in this area. This can be achieved through structured training programs that focus on building skills in counselling and establishing referral pathways. NGOs have the potential to serve as valuable partners in providing rehabilitation services and catering to the specific needs of various population groups. By leveraging their existing activities and fostering collaboration, NGOs can improve access to mental health services and facilitate cost-effective interventions. Emphasizing community-based approaches and incorporating effective models within the mental health sector will further empower NGOs to play a more significant role in promoting mental well-being in Gujarat (Indian Institute of Management Ahmedabad, 2004 ^[9]).

Table 2: Mapping of mental health service providers and type of services in Gujarat

Service Providers/ Interventions	Settings												
	Government						Private						Household Caregivers
	SC	PHC	CHC	DH	TH	HMH	Clinic	GP	PH	ISM	LQP	NGOs	
Prevention/ Promotion													
Primary care													
Out-patient care													
In-patient care (short-term)													
In-patient care (long-term)													
Rehabilitation													

Note: This table uses four shades to indicate availability of services in various settings. Dark shade to no shade indicates: high presence, medium presence, low presence, and no presence. The definition of other terms used in the table is as follows: SC: sub-centre, PHC: primary health care centre, CHC: community health care centre, DH: district hospital, TH: teaching hospital, HMH: hospital for mental health, Clinic: private clinic, GP: general practitioner, PH: private hospital, ISM: Indian system of medicine practitioner, LQP: less-qualified provider, NGO: non-governmental organization. Caregivers include carer groups. There are no carer groups in Gujarat at present.

Source: Indian Institute of Management Ahmedabad, 2004^[9]

The table above illustrates the distribution of Mental Health Service sources and the corresponding types of interventions. It is evident that NGOs play a role in prevention/promotion, primary care, and rehabilitation for mental health, albeit to a relatively limited extent. This suggests that there is still room for enhancing the involvement and interventions of NGOs in addressing mental health concerns, with respect to the local context of Gujarat. The active involvement of NGOs will be instrumental in expanding access to mental health care, promoting community resilience, and fostering a supportive environment for individuals experiencing mental health challenges. As of now, Baroda Citizens Council provides services in the form of interventions for the prevention of mental health issues as well as rehabilitation through its Mental Wellness Program.

About Baroda Citizens Council

Baroda Citizens Council (BCC) is an NGO located in the Vadodara city, situated in the Gujarat state of India. It traces its origins back to 1966 when it embarked on a journey as an advisory body for the Baroda Urban Community Development Project. Established in collaboration with the American Friends Services Committee, a Quakers group, BCC was formally registered under the Societies Act and entered into a tripartite partnership with the Baroda Municipal Corporation, The Maharaja Sayajirao University of Baroda, and the Federation of Gujarat Industries. Initially conceived as an advisory organization, its primary mission was to provide support and facilitate self-help initiatives within urban slums.

As time progressed, BCC evolved to pioneer tailored urban community development projects, addressing the unique needs of various localities. Over the years, these programs have been refined and expanded, with a focus on fostering sustainable development and community empowerment. Today, Baroda Citizens Council stands as a widely recognized Community Development Organization, extending its reach beyond urban areas to encompass rural parts of the Vadodara district.

It is engaged in a diverse portfolio of initiatives, including healthcare, child rights, women and youth empowerment, community development, and awareness-based projects,

often in collaboration with both government bodies and national and international funding agencies. It has initiated projects like Balwadi, Program After School Support (PASS), SAVERA – an educational Sponsorship Program and others in the spirit of developing Holistic Education. Under the Women Empoerment initiative, it also runs the PRERNA project which provides skill development training to women belonging to the rural and urban slum pockets of Vadodara city in Gujarat. It has a Divyang Center where differently-abled children are engaged in various therapies and activities to strengthen their overall development.

Mental Wellness Program – A BCC Initiative

As a community development organization, Baroda Citizen’s Council focuses on Mental Well-being as one of its prime initiatives. As part of this, the Mental Wellness Program has been established as a project intended to provide mental health support to the residents of urban slums.

The Mental Wellness Program, a compassionate and holistic initiative, has been designed with a profound understanding of the challenges faced by residents of urban slums. Its primary objective is to alleviate the burdens of everyday life and promote emotional and mental well-being through counselling and support. This program has established three Community Wellness Centers strategically located in Mandvi, Gotri, and Tandalja areas of Vadodara with a particular focus on children coming from troubled families, or those living with grandparents or relatives due to orphanhood.

At these centers, these resilient young minds engage in a diverse array of activities, including art, reading, singing, dancing, and sports. These activities serve not only as outlets for creativity and expression but also as powerful tools for stimulating their minds and enhancing their overall well-being. Recognizing the importance of education, foundational lessons in reading and writing are also imparted to these children, nurturing their intellectual growth.

One of the remarkable facets of this program is its commitment to broadening horizons. Educational trips to science exhibitions, planetariums, and other places of knowledge are organized to ignite their curiosity and instil a

love for learning. These experiences go a long way in piquing their interest in seeking knowledge beyond the confines of their daily lives.

As part of its comprehensive approach to mental wellness, the program also offers a helpline and counselling services for those in need. Regular sessions are conducted both over the phone and in person, providing crucial support to individuals facing mental health challenges. The provision of a helpline and counselling services as part of the comprehensive Mental Wellness Program holds significant importance in addressing various mental health challenges and promoting overall well-being within the community. These activities play a crucial role in providing immediate and accessible support to individuals facing mental health issues, thereby helping to prevent crises and alleviate distress.

Firstly, the availability of a helpline ensures that individuals have a confidential and non-judgmental platform to seek assistance and guidance whenever they need it. This accessibility is particularly vital for those who may be reluctant or unable to access traditional mental health services due to stigma, barriers to access, or the urgency of their situation. By offering a helpline, the program extends its reach to individuals who may otherwise not receive support, ensuring that help is readily available when it is needed most.

Additionally, the provision of counselling services offers personalized support tailored to the specific needs of individuals experiencing mental health challenges. Counselling sessions provide a safe and supportive environment for individuals to explore their thoughts, feelings, and concerns, and develop coping strategies to manage their symptoms effectively. These sessions may address a wide range of issues, including depression, substance abuse, domestic violence, anxiety, eating disorders, and family disputes, among others. By addressing these challenges through counselling, the program helps individuals build resilience, enhance self-awareness, and develop skills to navigate life's challenges more effectively. Furthermore, the program's emphasis on providing guidance for accessing legal assistance and other resources underscores its commitment to addressing the multifaceted nature of mental health challenges. Many individuals facing mental health issues may also encounter legal or practical obstacles that further exacerbate their distress. By offering support and guidance in accessing legal assistance and other relevant resources, the program aims to empower individuals to address these challenges effectively and regain a sense of control over their lives.

In a commendable effort to reach out to a wider spectrum of the community, the program collaborates with government offices and police teams, extending counselling services to both victims and accused individuals involved in cases brought to their attention. This approach not only addresses immediate needs but also contributes to conflict resolution and the healing process. By offering support to all parties involved in such cases, the program seeks to address the root causes of domestic conflict and provide individuals with the tools and resources they need to rebuild their lives in a healthy and constructive manner.

The special she team formed by Vadodara Police to help women, children and senior citizens, has partnered with Baroda Citizens Council to avail the counselling services for victims and beneficiaries of the special task force.

Additionally, the Mental Wellness Program initiates awareness sessions focused on mental health literacy, breaking down barriers of stigma and fostering understanding within the community. The commitment to mental well-being extends to home visits, where dedicated staff members provide support and guidance to families in need.

Impact of the Mental Wellness Program by BCC

Residents of urban slums facing marginalization often have precarious economic ties. Their income sources can be diverse, including wages, government assistance, sporadic work, or charity. It's common for them to mix or transition between these methods to make ends meet. Poverty, reliance on others, and feelings of shame are regular aspects of economic instability and social exclusion. These encounters differ for men and women and change with age. Both poverty and economic marginalization have direct and indirect repercussions on individuals' well-being. Community psychology serves as an ideal framework for guiding individuals in responding constructively to the challenge of marginalization. Its rejection of focusing solely on individuals and labelling social problems as inherent pathologies is a crucial starting point. Furthermore, its dedication to engaging people in participatory, action-oriented initiatives offers significant potential for aiding those experiencing social marginalization in their efforts to actively resist and instigate positive change (Kagan, *et al.*, 2002) ^[10]. In the context of the Mental Wellness Program, community psychology provides a theoretical foundation that encourages a holistic and community-driven approach to address the mental health needs of marginalized populations.

Furthermore, the Mental Wellness Program demonstrates a clear utilization of the principles from Positive Psychology. Positive Psychology is a field that emphasizes the study and promotion of positive emotions, strengths, resilience, and overall functional well-being of people, groups and institutions Gable & Haidt, 2005 ^[7]. Several aspects of the program align with the core tenets of positive psychology.

The program engages children in various positive activities, such as art, reading, singing, dancing and sports. These activities are known to promote positive emotions, creativity, and a sense of accomplishment, all of which are key elements of positive psychology. They cultivate positive emotions like joy, gratitude, and optimism for mental well-being. Further, by providing foundational lessons in reading and writing, the program helps children develop essential skills that contribute to their resilience. Resilience is a fundamental concept emphasizing the ability to bounce back from adversity. The focus on community engagement and educational trips encourages positive social interactions and the formations of supportive relationship. In essence, the program's holistic approach to well-being, including physical, emotional and intellectual aspects aligns with the goals of positive psychology, which seeks to enhance overall life satisfaction and quality of life.

The practice of counselling, as part of the Mental Wellness Program also draws inspiration from the Rational Emotive Behavior Therapy for the purpose of supporting the emotional and psychological well-being of the urban slum residents. Rational Emotive Behavior Therapy (REBT) is a cognitive-behavioral therapeutic approach developed by Albert Ellis. It revolves around the core concept that our

thoughts, particularly irrational thinking, play a significant role in causing emotional and behavioral problems. In REBT, it is believed that these thoughts, emotions, and behaviors interact together to create and sustain psychological distress. The therapy advocates the application of various cognitive, emotional, and behavioral techniques to evaluate, examine, and modify unproductive mental processes MacLaren, Doyle, & Digiuseppe, 2016^[12]. REBT encourages individuals to recognize irrational beliefs that contribute to emotional distress. Program counsellors work with participants to identify and acknowledge irrational thoughts related to their challenging life circumstances. A lot of the cases that came to the center revolved around extra-marital affairs, disturbed familial environments, economic paucity, domestic violence, alcoholism and substance-use. These were either the results or the reason to cause negative thought patterns leading to imbalance of mental health and other negative emotions. Drawing from the principles of Rational Emotive Behavior Therapy helped greatly in providing concrete solutions to complex issues pertaining to mental wellness.

REBT also provides practical strategies for emotional regulation, including mindfulness and relaxation techniques. These techniques incorporated into the program's activities also help children to manage stress, anxiety, and other challenging emotions effectively. By integrating these REBT principles and techniques into its counselling and support services, the Mental Wellness Program equips urban slum residents with valuable cognitive and emotional tools. These tools enable them to develop emotional resilience, cope with adversity, and replace unproductive beliefs and behaviors with healthier alternatives.

Further, as part of the techniques adopted in the Mental Wellness Program at BCC, a client-centered approach has also been integrated into the therapeutic process wherever required. Client-centered therapy, also known as person-centered therapy or Rogerian therapy, is a form of psychotherapy developed by Carl Rogers in the early 1940s. At its core, this therapeutic approach is grounded in the belief that individuals possess an innate tendency towards self-actualization and psychological growth. Unlike more directive forms of therapy, such as psychoanalysis or cognitive-behavioural therapy, client-centered therapy places the client at the center of the therapeutic process (Yao & Kabir, 2024)^[25].

In client-centered therapy, the therapist adopts a non-directive stance, refraining from imposing their own interpretations or solutions onto the client's experiences. Instead, the therapist creates a supportive and empathetic environment where the client feels safe to explore their thoughts, feelings, and experiences openly and without judgment. The therapist's role is primarily to facilitate the client's self-exploration and self-understanding rather than providing advice or guidance. Through the process of self-exploration facilitated by the therapist, clients can gain insights into their emotions, beliefs, and behaviors, leading to greater self-understanding and psychological well-being. BCC adopts this approach to enrich their counselling services by giving the clients a safe space to speak about their concerns openly. Each individual's experience with relation to the situation they may be facing, is unique in nature, and so is their reaction to it. With continued interaction and counselling sessions with the clients, the counsellors at BCC ensure that the case is well-studied and

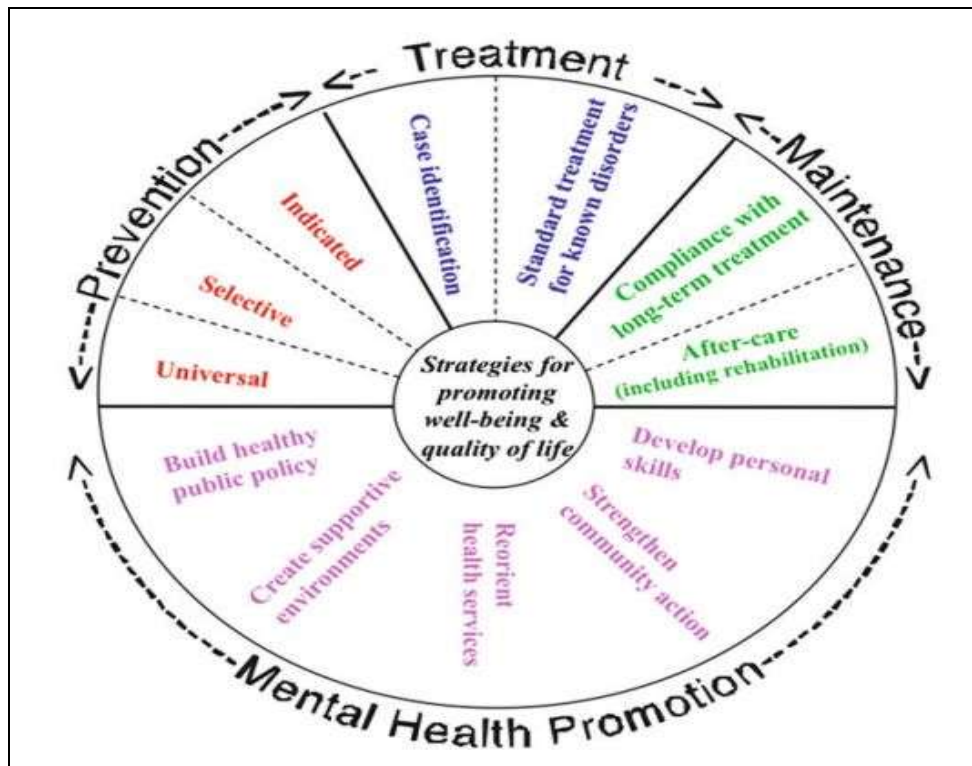
a suitable method of resolution is adopted. In certain contexts, it becomes necessary to let the client direct the course of the therapy. By demonstrating empathy and unconditional positive regards towards their clients, BCC works towards creating a safe and non-judgemental environment for them to express their thoughts, feelings and concerns. Instead of imposing advice or solutions, counsellors collaborate with clients to explore and identify their needs, and work towards their self-defined goals. This has proven to be very fruitful in empowering the clients towards building and strengthening their own mental fortitude.

A study was conducted on the experience of Greek NGO's mental health workers on working with refugees and asylum seekers in Greece. As part of the study, mental health workers were interviewed, based on which one of the major themes that emerged was the importance of being client-centered. It was highlighted that each client should be approached as a unique human-being. It also helps in establishing an effective therapeutic relationship between client and counsellor, which in turn facilitates the therapy process (Bouki, Lamproukou, Poulaki, & Louka, 2020)^[4].

While the use of theory to interpret the foundation of the Mental Wellness Program has been explored, the impact of this program provides a clear understanding of its significance. The project has shed light on the intricate nature of supporting and fortifying the mental wellness of urban slum residents, revealing that it is a multifaceted process contingent upon numerous factors. Understanding the social and psychological implications of the program's activities underscores the deliberate, gradual nature of this endeavour, demanding unwavering dedication and consistency. The project's influence may not be immediate, but it takes root deeply within the community. It is the small, persistent contributions that sow the seeds of hope for a brighter present and future for these residents. The fulfilment of beneficiaries and the increasing number of slum residents seeking assistance from the project's resources serve as powerful testimonials to the program's profound positive impact.

By prioritizing mental well-being, mental wellness programs contribute to enhanced overall quality of life, improved productivity, and greater social cohesion. Moreover, promoting mental health helps prevent the onset of mental illnesses and reduces the burden on healthcare systems. By empowering individuals with coping skills, support networks, and access to timely interventions, mental health programs not only alleviate suffering but also promote a culture of understanding, empathy, and inclusion. Ultimately, investing in mental health initiatives lays the foundation for a healthier, happier society where everyone has the opportunity to realize their full potential.

Integrating Mental Health Intervention in Urban Slums
Mental health interventions are designed with the intent to assist individuals in dealing with mental health challenges like stress, anxiety and depression, among many others. The philosophy behind the structure of these interventions prioritizes a holistic approach towards addressing mental wellness. This includes ensuring the prevention, treatment, maintenance and promotion of mental health. These interventions can be made effective by aligning their strategies with the broader goals in order to assist the local communities in coping with mental health challenges.



Source: Barry, 2013 [1]

Fig 1: Depicting mental health promotion within the spectrum of mental health interventions

The above figure is the depiction of a very comprehensive model that emphasizes the importance of ensuring well-being and quality of life through outlining strategies for mental health promotion. At the core of these efforts lies prevention, which forms the foundation of mental health promotion endeavours. Through awareness campaigns, education initiatives, and early intervention programs, preventive measures aim to reduce risk factors associated with mental health issues while simultaneously enhancing protective factors within communities. The Mental Wellness Program by BCC undertakes awareness initiatives to address common Mental Health concerns and sensitize the people about availability of resources and opportunities to overcome difficult situations.

Beyond mere prevention, mental health promotion endeavors also prioritize the promotion of overall well-being. This entails activities geared towards fostering positive mental health, such as mindfulness practices, stress management techniques, and self-care routines. By emphasizing the cultivation of resilience and positive psychological states, these efforts contribute to a holistic approach to mental health. While BCC’s Mental Wellness Program works on the promotion of availability of resources for people struggling with mental health, there is little work that has been done towards creating awareness about early detection and prevention of mental health concerns.

In cases where mental health issues do arise, timely treatment and support become imperative. Access to professional help, counselling services, and therapy ensures effective management of mental health concerns. Additionally, the role of support networks, including family and friends, is underscored as they provide vital assistance and encouragement throughout an individual's mental health journey. The Mental Wellness Program primarily focuses on this aspect of intervention as it provides a conducive space and environment to provide access to professional guidance

and counselling services.

Moreover, recovery-oriented approaches are integral to mental health promotion efforts, emphasizing resilience and empowerment. Individuals are encouraged to develop coping skills, establish meaningful social connections, and engage in activities that foster personal growth and fulfilment. Maintenance of mental well-being involves ongoing self-care practices and adherence to treatment plans, further emphasizing the importance of sustained efforts in preserving mental health. The programs conducted by BCC, apart from the Mental Wellness Program, includes the likes of PRERNA and Balwadi project, that provide a platform for skill development initiatives and rehabilitation & care for Persons with Disabilities (PwDs). This helps individuals to build resilience and empowers them to ensure personal growth and independence.

Overall, mental health promotion adopts a holistic approach that recognizes the interconnectedness of physical, emotional, social, and spiritual aspects of well-being. By addressing these various dimensions, mental health programs strive to ensure the overall well-being and quality of life for individuals and communities alike. BCC works towards strengthening community action towards ensuring mental wellness, with small but consistent efforts, it envisions a positive transformation of the society to ensure its development and strengthening of Mental Wellness in urban slums.

Conclusion

In recent times, the spotlight on mental health has intensified, and the relevance of addressing mental well-being has never been clearer. This heightened awareness extends to urban slums, where marginalized populations face unique challenges that underscore the critical importance of mental health support. The Mental Wellness Program implemented by Baroda Citizens Council (BCC)

stands as a commendable endeavour, exemplifying the dedication to enhancing the lives of those living in urban slums.

The program's comprehensive approach reflects a profound understanding of the multifaceted nature of mental well-being. Through various activities, counselling services, educational initiatives, and community engagement, it has made significant strides in promoting mental health among slum residents.

While the journey towards mental wellness in urban slums is slow and demands unwavering consistency, the positive impacts are undeniable. The program's success is evident in the satisfaction of its beneficiaries and the increasing number of residents seeking help. It is a testament to the fact that even small contributions can result in significant improvements in the lives of marginalized individuals.

Similar programs focusing on Mental Wellness in urban slums can further benefit from encouraging greater involvement of the community by engaging community leaders and influencers. Further, exploring the use of digital platforms, providing mental health first-aid training, conducting impact-assessments and engaging the youth in leadership roles to promote mental health awareness can lay the ground to reach a larger population of the urban slums and provide suitable support. Setting up of Community Wellness Centers in underserved areas can result in providing access to a larger population as well. NGOs can be a source of great remedy for the needs of establishing mental wellness in the community. Hence, it is essential for NGOs to bolster their efforts and work towards playing an active role in mitigating mental health concerns in the community through a myriad of effective interventions. Programs aimed at promoting mental wellness in urban slums can significantly benefit from enhanced community involvement and strategic interventions. Engaging community leaders and influencers can mobilize grassroots support and foster a sense of ownership and responsibility for mental health initiatives. By harnessing the influence and reach of these key figures, programs can amplify their impact and effectively disseminate information and resources within the community.

Furthermore, leveraging digital platforms can extend the reach of mental health services and resources to a wider audience. From online counseling sessions to informative content on mental health, digital platforms offer accessible and convenient avenues for individuals in urban slums to seek support and information. Digital platforms can also be used by NGOs to inform the masses about their initiatives in order to garner greater support from the people as well as to create awareness of the need to address mental health. Integrating mental health first-aid training into community programs equips residents with essential skills to identify and respond to mental health crises, thereby enhancing community resilience and support networks.

Conducting impact assessments allows programs to evaluate their effectiveness and tailor interventions to better meet the needs of urban slum communities. By gathering data on outcomes and feedback from beneficiaries, programs can continuously improve their services and ensure they are making a meaningful difference in the lives of residents.

Engaging youth in leadership roles not only empowers young people to become advocates for mental health awareness but also ensures that programs are relevant and engaging for the target demographic. Youth-led initiatives

can leverage innovative approaches and peer-to-peer support networks to promote mental wellness and destigmatize seeking help for mental health issues.

Finally, establishing Community Wellness Centres in underserved areas provides a centralized hub for accessing mental health services and support. These centres offer a range of resources, including counselling, educational workshops, and recreational activities, catering to the diverse needs of urban slum residents. NGOs play a crucial role in driving these initiatives forward, leveraging their expertise, resources, and community networks to address mental health concerns effectively. By adopting a comprehensive and community-driven approach, programs focusing on mental wellness in urban slums can make significant strides in improving the well-being of residents and lay the groundwork for sustainable and impactful interventions that address the unique challenges of urban slum environments.

Further, documenting and reporting the current landscape of mental wellness in the Indian context is crucial for understanding the status of mental health initiatives at the local, state, and national levels. However, upon reviewing available studies, it becomes apparent that there is a dearth of literature on this topic. This scarcity highlights the fact that mental health remains a largely understudied subject in India.

While studies on clinical cases and neurological conditions are more readily available, there is a noticeable lack of research on mental wellness and the various stressors that individuals face in their day-to-day lives, including domestic issues. This gap in research is concerning considering the prevalence of mental health concerns among the population, both in overt and subtle forms.

Addressing this gap in research is imperative to gain a comprehensive understanding of mental wellness in India and to inform evidence-based interventions and policies. By documenting and reporting on the challenges and resources available for mental health support, researchers can contribute to filling this critical gap in knowledge. Moreover, shedding light on the societal factors contributing to mental health concerns can help prioritize resources and efforts towards promoting mental well-being in the country. In conclusion, the Mental Wellness Program of Baroda Citizens Council exemplifies the positive impact that dedicated efforts can have on the mental well-being of urban slum residents. By continuing to adapt and expand its services while staying rooted in its core principles, the program has the potential to bring lasting positive change to the lives of those it serves. It stands as a beacon of hope, illuminating the path towards a brighter and more mentally healthy future for urban slum communities in the city of Vadodara.

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