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NEP 2020: MANODARPAN (MIROR OF MIND) - AN INITIATIVE FOR PSYCHOSOCIAL SUPPORT AND MENTAL HEALTH PROMOTION

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ABSTRACT:

UNICEF in its report has mentioned the status of the mental health of the school children, adolescents and health experts during the COVID-19 pandemic. The mental health of the population in general and the children in India in particular have been affected in many ways due to the risk and restrictions posedby pandemic. The outbreak of the global pandemic had presented a challenging time for everyone around the world. This has increased quarantining behaviours and anxiety among the people. Children and the people have suffered a lot during these times and encounteredmany personal and family issues. As the schools were shut down and restrictions were implemented, many of the children were staying away from family, friends, classrooms and playground. Hence there was a need for the promotion of mental health and its treatment. The steps were initiated by many countries to help the affected children across the globe and to provide effective and productive solutions. The Government of India has also taken the initiative to support the childrento provide psychosocial support in comprehensive manner in the critical times and thereafter. The Ministry of Human Resources Development (MHRD) came out with the great ideas through an expert consultation and prepared the comprehensive and effective programcalled as 'Manodarpan' under Atmanirbhar Bharat Abhiyan. This paper deals with the major highlights of this initiative end its activities for promotion of mental health and preventive measures.

Keywords: Mental health, Manodarpan, NEP 2020, Mental Health Promotion and Prevention.

1.INTRODUCTION:

Children around the world have been locked out of classrooms, sequestered in their homes and robbed of the everyday joy of playing with friends due to COVID-19 pandemic. Millions more families have been affected and unable to make their livelihood possible. Some are wondering where this world is headed and what their place is in it. These are very challenging times for children and young population (UNICEF, 2021). But even in absence of the pandemic, psychosocial distress and poor mental health are very common in children scarred by conflict and serious adversity, deprived of access to schooling, protection and support. In fact the pandemic represents merely the tip of the iceberg to poor mental health consequences, we have been ignoring and unless we do something, it will have devastating results for children and humanities. By ignoring the mental health, we weaken their capacity to learn, work, build meaningful relationships and contribute to the world. When we ignore, we fail to support them to nurture and care to the best of their ability(UNICEF, 2021).

1.1 NEP 2020:

Quality and excellence in the education sector is one of the major initiatives of the Government of India in its five year plan. Quality education plays a vital role in the development of human capital and is linked with an individual's mental health and well-being and opportunities for better living. The New Education Policy (NEP) 2020 has many innovative suggestions to improve the quality and broadness of education system in India. There are many expectations from all the sectors of the country about NEP 2020, to restructure and redesign the education system so as to fulfill the demands of the 21st century (Patil. 2022b).NEP 2020 announced after 34 long years has brought about anepical change in the new educational policy of our country. This policy has become a stepping stone in the new era of transformation in education for the 21st century (Patil, 2022a). NEP 2020 is the first policy of the 21st century approved by the union Cabinet of India on 29th July, 2020. It outlines the vision of India's new education system. This policy will be a guiding force for the next 20 years. It is the aspirations of the Indian people that have shaped this policy to cater the needs of all sections of the society. It inspires every institution across India to become the agent of change with their motive force- a teacher. NEP 2020 is a student motivated learner centric and will be beneficial at all levels of education. It emphasizes the development of the creative potential of each individual and higher order cognitive capacities like critical thinking and problem solving and also will be driving the all-round development of the students. NEP 2020 has placed great priority and higher importance to the physical and mental health of students and teachers. Hence, Government of India has undertaken the initiative called "MANODRPAN" (Mirror of Mind), under Prime Ministers Vision of "Atma Nirbhar Bharat" which would be channelized through the NEP 2020 to promote the mental health and its awareness across the country.

1.2 Concept of Mental Health:

Mental health is an integral and essential component of health. According to the WHO constitution "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." It is a state of well-being of a person and his abilities to cope with the normal stresses of life and help in productivity thereby making a contribution to the community (WHO, 2001). Mental health refers to the state of a person's mind, both their emotions and thoughts. It is an inseparable part of general health and has an inherent value for the individual, society, and culture and essential for the well-being and functioning of individuals and families and communities at large. Mental health and well-being are directly linked to the academics and the success of students. Mentally healthy children have a positive quality of life and can function well at home, in school and the society at large (Patil, 2022c). Good health is vital to human happiness and well-being that contributes significantly to prosperity and wealth and even economic progress, as healthy populations are more productive and live happily. It is important at every stage of life, from childhood and adolescence through adulthood. It is a positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities and the wider environment" (NHS, 2015). The serious concern, the world is facing today is psycho-social stress for many individuals, particularly children in their early ages. It has created new challenges to the parents and teachers in providingsatisfactory support and to engage them positively(GOI, 2020). Mental health and well-being are interconnected to their academic achievements (Gutman and Feinstein, 2008, Stewart, 2007). The school programs that focus on social, emotional and academic learning help to improve school attitudes, behaviour and academic performance (Zins et al., 2004).

1.3 Role of Schoolsin Mental Health Promotion:

Schools play a vital role in the promotion of positive mental health in student's life. Schools also provide a safe and supportive environment for building life skills and flexibility and a strong sense of connectedness. Nurturinghealthy relationships with peers, teachers and school staff are essential for children's positive experiences of school and their cognitive and emotional development. The needs and well-being of school staff need also to be considered and supported. Schools are in a unique place to promote mental health and emotional well-being of students. Various agencies including familiesplay an essential role in providing the mental health promotion ideas and initiative to cope up with mental issues. There are evidences that such initiatives influence positive mental health and minimizethe risk factors and emotional problems through socio-emotional learning and interventions (WHO, 2004). The effective policy determines the success of the mental health promotion activities from individuals to the community and society supported by government or other working organizations. Responsibility for mental health promotion and prevention also lies with the widespread school community (Figure-1). In addition, collaboration and partnerships between different sectors and agencies are essential. Mental health is part of their overall health and emotional well-being and is about how they feel, think, and behave, and about how they cope with stress and the ups and downs of everyday life. It is also about their self-esteem and confidence, and ability to ask for help and to access support. There is a need for schools to develop integrated structures and systems at whole-school level to support young people in distress and to respond appropriately in the event of a crisis.

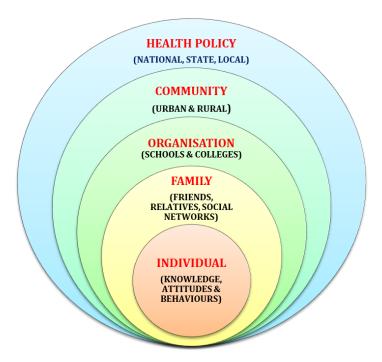


Figure-1: Socio-Ecological UNICEF Model for Mental Health Promotion and Prevention.

Students spend a significant amount of time at school has estimated approximately 15, 000 hours from kindergarten to completion (Rutter, 1991), and are therefore reachable for mental health promotion, prevention and intervention. Schools play a significant role in the early recognition and identification of children with mental illness and also in altering the school experience to yield better results. School is a more familiar and less stigmatizing or threatening environment for students in need of help compared to hospitals and medical offices. Working with children who have

mental health problems can be very challenging and stressful to teachers. Enhancing student emotional health can improve satisfaction and retention among teachers. Schools influence the adoption of healthy behaviours which improve quality of life across the lifespan.

School mental health promotion has proven efficacy in the holistic growth of children (Weist, Kutcher and Wei, 2015). It strengthens abilities, such as resilience and stress tolerance that are needed for the overall growth of children. However, it is severely neglected in India (Kumar et-al, 2020). The felt need for a strong mental health promotion in India is intense. The need for immediate implementation of psychological services is deliberateddeeplyin CBSE board schools (CBSE, 2008, 2017). Many programs and policies, including the National Mental Health Program (NMHP), have emphasized the implementation of School Mental Health Promotion. The draft rule for the implementation of the new national mental health-care bill proposes a few steps to deal with the mental health issues of school children (GOI, 2017). However, in spite of the strong felt need, the SMHPP in India is running with a fragmentary approach for decades without having a clear perspective (Kumar, et-al, 2015).

1.4 Mental HealthPromotion and Awareness in India:

Mental health is an essential and integral part of health. It enhances the competencies of individuals and communities thereby enabling them to achieve their self-determined goals (WHO, 2004). Mental disorders are common and universal, affecting people of all countries and societies. Mental disorders rank fifth among the major causes of global burden of disease. In developing countries majority of the population suffering from mental illness do not have access to treatment (WHO, 2002 and Saxena, et-al, 2014). India is a geographically vast country with diverse socioeconomic conditions. Schools can substantially differ in terms of resources, socioeconomic background of children, educational level of parents, and so on. Moreover, various central and state ministries have their roles and responsibilities related to child health and development. As per the WHO (1994) an effective SMHPPincludes the relationship between the school and the community involving families and other stakeholders at all the stages of planning, implementation, and evaluation of the effectiveness of the program (Kumar, 2021). Promotion of mental health is as important as the promotion of physical health. In fact to have healthy body and mind there must be equity in promotion of both physical and mental health. A key goal of mental health promotion is to ensure that the social, cultural, economic and environmental conditions conducive to good health are accessible to all members of a given community (Rai, et-al, 2014).

Thedevelopment in the field of mental health appears to be very slow and without mental health there can be no true physical health, (Kolappa, et-al, 2013). Even more than 60 years later, the scenario has not changed considerably. About 14% of the global burden of disease is attributed to neuropsychiatric disorders.

There are a few studies which have measured mental health literacy in the Indian context. One study found mental health literacy among adolescents to be very low, i.e. depression was identified by 29.04% and schizophrenia/psychosis was recognized only by 1.31%. Stigma was noted to be present in help-seeking (Ogorchukwu, et-al, 2016). These findings reinforce the need to increase awareness of mental health. Mental health literacy is a related concept which is increasingly seen as an important measure of the awareness and knowledge of mental health disorders.

1.5 Need for Promotion of Mental Health in Schools and Colleges:

Today's world is characterised by intense pressure from all aspects of life. There are certain factors like increasing use of social media, global exposure at a young age, increased competition in academic spheres, alienation and constant social comparison has led to increased mental health issues among young students at an unprecedented level. Most schools in the country focus on health only on a physical level by laying emphasis on the importance of good nutrition and exercise. However, they often completely ignore mental and emotional health as vital parts of wellness. Neglecting children's mental health has serious consequences on their development as well as on life that have been well documented. Mental health issues can disrupt every aspect of a child's life and affect their important processes like learning, growth and social adjustment. If these issues are ignored for a long period, they can increase in severity and may lead to serious behavioural issues like self-harm and at times, even suicide. According to research, 70% of mental health problems that appear in young children can be addressed and successfully resolved through prompt action and early intervention. It has been observed that a maximum number of individuals only get help for their mental health problems in their adulthood, despite most of these issues showing signs by teen-age. Mental health services in India are neglected area which needs immediate and serious attention from the government, policy makers and civil society organizations. Mental health is a key part of successful life and overall well-being. It refers to the way in which we are aware of our own abilities so we can cope well with the difficulties of life.

Hence, there is utmost need to promote and prevent mental health issues to help the children and their families. It is found that there was less investment and allocation of resources to the health sector over the years with clear declining trends in the last decade and uncontrolled rapid development of an unregulated private health sector, especially in the last two decades. But it was framed in 35 long years after independence. Evolution of the health policy in India was described by Duggal (2006), under the project "Health Policy and Systems" Despite health is a state subject. So some recommendations were made by the committees and declarations by some government organizations which resulted in the practice, promotion and prevention of the mental health activities what they are today! Here are some developmental aspects of the mental health promotion and prevention in India illustrated in the **Table-1**.

2.LITURATURE SURVEY:

The COVID-19 pandemic and the social distancing measures by many countries have implemented have affected the daily activities. As of April 8, 2020, schools have been suspended nationwide in 188 countries, according to UNESCO. Over 90% of enrolled learners (1·5 billion) worldwide were out of education. Such closures meant a lack of access to the resources to the schools children and adolescents with mental health needs (UNESCO, 2020). A systematic review done by Savitha and Bichithra in India found that the prevalence rate of child and adolescent psychiatric disorders in the community was 6.46% and among school children was 23.33%. It means that 29 million children and adolescent suffered from one or other way of psychiatric illness at a given time (Malhotra and Patra, 2014). So it was very difficult for a country like India to handle such a huge problem with

insufficient resources coupled with very slow development in psychiatry. As per the recommendations by WHO every country should have a National Plan for Child Mental Health. So, there was an urgent need to develop mental health resources in India (Saldanha, 2003). Teachers are not fully aware of their role when it comes to children in their classrooms who present with symptoms related to depression (Repie, 2005).

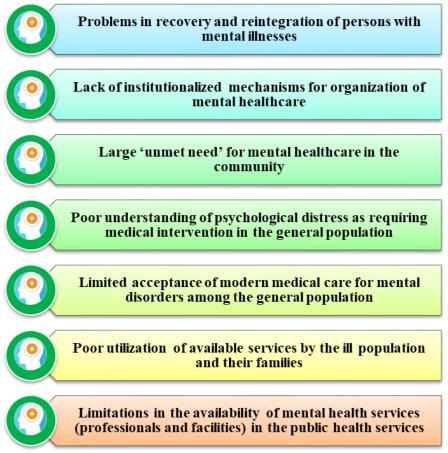


Figure-2: Challenges for Mental Health Promotion and Prevention in India.

Table-1: Historical Developments in the Mental Health Services and Promotion in India

SR. NO.	YEAR	MAJOUR HISTORICAL DEVELOPMENTS	
1	1946	Bhore Committee recommendations on Mental Health	
2	1962	Mudliar Committee recommendations on Mental Health	
3	1975	Srivastava Committee Recommendations	
4	1975	Starting of "Community Mental Health Unit" at NIMHANS, Bangalore, India	
5	1976-1981	Raipur Rani project as part of WHO multi centric project	
6	1982	NMHP launched and Implemented	
7	1980-1986	Primary Mental Healthcare Centres started	
8	1982-1984	ICMR Training started	
9	1985-1990	DMHP Pilot test in Bellary District, Karnataka.	
10	1985-1987	ICMR Project-Mental Health in PHC	
11	1995	Meeting of Central Council of Health	

12	1996	Mental health program at a workshop of all health administrators in Bangalore.	
13	1997	DMHP launched in 4 districts of the country	
14	1997-2000	Phased expansion of DMHP districts	
15	1999	Mental Health agenda of World Health Organization set	
16	2001	World Health Day theme based on Mental Health	
		World Health Report with focus on Mental Health	
17	2003	NMHP re-strategized District Mental Health Programme (DMHP)	
18	2007-2012	NMHP in X Plan with focus on manpower development schemes	
19	2011	A review of 23 districts DMHP conducted by NIMHANS	
20	2012-2017	National Mental Health Program in the XIIth pla	
21	2013	First Mental Health Bill Mental Health Bill	
22	2014	National Mental health Policy of India, New Hope	
22	2017	Mental Health care Act for mental healthcare and services to help persons with mental illness and to protect and promote	
23	2018-2020	Universal Health Coverage-HWC Compendium	
24	2020	HRDMinistry launched the Manodarpan initiative under Atmanirbhar Bharat Abhiyan to provide psychosocial support to students for their mental health and well-being.	
25	2021	Launching of the Ayushman Bharat - Health and Wellness Centres.	

In India, there is no separate comprehensive policy to deal with child mental health issues. The existing policies for India stress the need for developing comprehensive child mental health program and services at various levels (GOI, 2017). An extensive review by Murthy dealt with the policies pertaining to children in India. It revealed the lack of clear-focused policies on child mental health due to uncoordinated efforts of the various sectors such as welfare, education, labor, health, law, etc. He proposed it to the existing mental health professionals of the country to reach out beyond their usual clinical preoccupation. He proposed one of the most effective intervention models for the country like India (Murthy, 2010). However, much work needs to be done as the existing programsare restricted to urban areas where it addresses thepsychiatric needs of the adolescents in government hospitals (Vranda, 2015). The National Institute of Mental Health Neuro Sciences (NIMHANS), Bangalore, India has recently designed a universal comprehensive school promotive mental health model called 'Promotive Mental Health and Well Being (PMHWB) program', to reduce risks and enhance psychosocial competencies and resilience of adolescents in school feasible and acceptable by teachers.

In a country like India, where resources are very limited, better and efficient utilization of the available resource is the only solution for the problem. Variety of literature is also available on child mental health and its promotion from the western part of the world, Anantkumar (2011) has described the challenges and prospectus of mental health services in rural India, while critical analysis of mental health promotion was done by Rai, et-al, (2014). The *Atmiyata* Intervention Approach (AIA) was studied by Shields-Zeeman, et-al (2017) for promoting wellbeing and improving access to mental health care in rural India. Mental Health Care Act 2017 was detailed out by Mishra and Galhotra (2018) with critical insights. Thus, there is plenty of research work available on the mental health issues and their treatment worldwide. But many of the researchers in the world in general and very fewpractitioners in India in particular have thrown the light on the promotion of the mental health and its prevention.

3.METHODOLOGY AND APPROCH OF RESEARCH:

The research methodology adopted is a combination of qualitative and descriptive type. The secondary data was collected from various sources. The secondary data was collected from various sources such as websites, journals, articles and other online and offline publications. It also takes into account, the extraction of summary of various documents on education policies, their importance, statistical records, historical background, analysis of the drafts and documents related to the education and mental health policies. Both primary and secondary sources were used to gather information about the information services rendered. Initially, information was gathered through the ministry about the programme and its objective. Further information was collected from different studies and research papers from various sources. In this research the important policies on mental health and documents or archives were analysed and interpreted by the researcher for evaluation of important inputs in arriving at certain conclusions and recommendations.

4. RESULTS:

4.1 MANODARPAN Initiative by Government of India:

The government's initiative to improve and enhance the mental health can be achieved only with the keen involvement and participation of the schools. Every school at the state, district, sub-district, and block level has to take the ownership and should implement the programs effectively. Organizing the online workshops of the new education policy for better understanding and clarity. Appointment of a psychologist or counselor as a permanent staff in the school would yield the best results. The school managements can also encourage their teachers to take up diploma courses on child psychology/school counseling. It is important to educate the children early in life, about their health and the right behaviours, so that they lead a healthy life and realize their full potential. The 'Manodarpan' initiative has been included in the Atmanirbhar Bharat Abhiyan, as a part of strengthening and empowering the human capital to increase productivity and efficiency in the education sector of the country.

4.1.1 Genesis of *Manodarpan*:

There are emerging mental health concerns with a specific focus on children, adolescents and youth especially children with disabilities. Children and adolescents may be more vulnerable and may experience a intensified levels of stress, anxiety and fearfulness, along with a range of other emotional and behavioural issues (Figure-3). The teachers as well as families with an empathetic approach can go a long way in mitigating such needs of children and adolescents even though it's challenging for teachers and parents. But a holistic and comprehensive guidance system in the form of counselling and wellbeing services for is essential. The suggestionsfrom the experts and the educationists, health experts etc., were received by the HRD Ministryregarding growing issues of mental health after the onset of COVID-19 pandemic.

The task force came up with a plethora of recommendations which were accepted by the Minister and the name given for this initiative as 'Manodarpan', covering a wide range of activities a comprehensive and multimodal manner. A Working Group, having experts from the fields of education, mental health, child and adolescent psychology has been set up on the 9th of April, 2020, to take the agenda forward. This working group has undertakenextensive consultations with stakeholders for monitoring and promoting mental health of students on national helpline, and online resources.

4.1.2 Aims and Objectives:

The aim of *Manodarpan* is to help students to live their lives happily, effectively and productively and become resilient over time with the help of life skills even in the face of challenges and roadblocks. Under the initiative, all students from Schools affiliated to CBSE/ ICSE/ State and Private Boards will be covered. A Web-page has been created on the website of the Ministry of Human Resource Development which contains advisory, practical tips, posters, videos, do's and don'ts, FAQs and online query system. A National helpline has also been set upfor a country-wide outreach to students from schools, colleges and universities. Tele-counselling will be provided to the students through this help line to address health and psychosocial issues. It will be managed by a pool of experienced counselors or psychologists. About 500 experienced counsellors have been enrolled to implement the national helpline to commence the first phase for students. The aim of Manodarpan is to help students to live their lives happily, effectively and productively and become resilient over time with the help of life skills even in the face of challenges and roadblocks.

4.1.3 Components of *Manodarpan* Initiative:

Children and adolescents may be more vulnerable and may experience a heightened level of stress, anxiety, and fearfulness, along with emotional and behavioural issues. The resources mobilized through the *Manodarpan* initiative are envisioned to facilitate a sustainable psychosocial support system for students, families and teachers and will be of great utility even in the post-pandemic times with proactive and preventive mental health and wellbeing services integrated into the mainstream (for more details refer Table-2).



Figure-3: Genesis of Manodarpan initiative by HRD Ministry, Government of India.

Table-2: Components of Manodarpan Initiative to support sustainable psychological system for students, families and teachers.

SR.	COMPONENTS	TARGET GROUP	OBJECTIVE
NO			
1	MHRD	School and college students, families, teachers,	Advisory, practical tips, posters, videos, do's
	Websitehttp://manodarpan.mhrd.gov.in	etc.	and don'ts, FAQs for psychosocial support.
2	Advisory Guidelines	For students, teachers and faculty along with	Help to identify issues and give quick tips for
		families.	dealing with them.
3	National Helpline number 8448440632	For school and collegesstudents	Tele-counselling by experienced counselors/
			Psychologists.
4	21st century skills Handbook	For school students	Learning Skills/ Transversal Competencies, to
			cope-up the challenges in real-life, leading to
			holistic progress.
5	National database & directory of	For schools and university	National Resource Database of counsellors and
	Counsellors		counselling services, for school and university.
6	Online Chat Platform '	For students, teachers, and families during	Besides, an interactive app will be developed
		COVID-19 and beyond	based on chat- bot to deal with various queries
			on mental health concerns of students.
7	Webinars, videos, posters, flyers, comics,	For all stakeholders in the education system	Resources will be uploaded on the webpage.
	and short films; on Fit India, Art and		Crowd sourcing all over the country will also be
	Culture		encouraged as peer support.

4.1.4 Activities for Promoting Mental Health and Wellbeing:

Mental health preservation and promotion has long been considered as an individual or family duty. Improving public health through extending community mental health services are essential. Beyond typical hospital-based therapy paradigms is urgently required, global service delivery paradigms should be established (Suma, 2022). Issues of well-being and psychosocial competence affect the entire school community including students, teachers, school administrators and members of the surrounding community. Definite mental health programs addressing these issues improve coping skills, decrease stress and increase support for a healthy school community.

- Preventing and creating a safe environment, improving the mental health and wellbeing of the whole school population through teaching about mental health through the curriculum and reinforcing through school activities and ethos.
- Early identification of issues by trained teachers as early and precisely as possible.
- Access to specialist supportor referrals for treatment.
- School mental health program on making health, fitness and nutrition programs to become the basis for health and nutrition education.
- Making all early childhood education and care programs from 0–6 years by training of family volunteers and *Anganwadi* workers for identification of needs of the children with disabilities.
- Making the curriculum flexible and appropriate to accommodate the diversity of students with disability in both cognitive and non-cognitive areas and all types of slow Learners.
- Teacher education courses with mental health, yoga and physical education as compulsory subject.
- Focus on life skills, stress management, drug abuse prevention, reproductive health and allied areas.
- Positive parenting sessions for child mental health and resilience and responsible child care.
- Capacity building for teachers/faculty ensuring entire school/college awareness and sensitivity for child abuse (including the POCSO act 2016) and other legal instruments for the schooling systems.
- Complete redesigning of report card, to make it holistic, 360-degree reflectingnot only progress of learner but the cognitive, affective, socioemotional, and psychomotor domains also.
- Counselling for various issues affecting mental health.

5. CONCLUSION:

Union Minister of HRD Ministry had launched Manodarpan initiative to provide psychosocial support to students for their Mental Health and Wellbeing, a step towards Prime Ministers vision of Atma Nirbhar Bharat. It is important to focus on continuing education on the academic front hence the mental well-being of the students also needs to be given equal importance. Various activities are also been planned to reduce the stress and anxiety in children. Therefore, better understanding of nature of mental health and illness is the key for changing the priorities, policies and practices in education, law, social services, housing and health. Hence, a comprehensive plan is required to focus on mental health at all levels. It needs to be supported through primary care, training programmes, and service delivery systems and could be addressed by adopting a youth-specific mental health policy.

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