

Dear Dignitaries and experts, a very good morning to all and welcome to this important session on “Advocacy let’s talk”.

We have had very interesting sessions during this conference but I believe today’s session is particularly important because it involves all connected stake holders.

As I understand, Autism and NDDs are mental disorders, which affect children early in life. If not managed properly, these disorders lead to behavioral, emotional and social problems. It is a great burden and problem can be appreciated best by the families and people who are affected.

Issues of mental health can no longer be ignored and governments and others should give priority to this issue. No country is fully equipped to deal with this problem.

In dealing with this problem, there are two critical issues. First is the early detection of such disorders in children. Second, timely management of the problem once it is diagnosed through a comprehensive approach of multi-disciplinary treatment by experts.

Why is advocacy important in dealing with this issue and where can it play a role? As I said all stake holders connected have a responsibility in this regard.

1. At political level: Advocacy is important to get political attention and priority for policy programmes and funding.
2. At doctors and other experts level: Advocacy is important to strengthen training capabilities in early detection and management.
3. At families level : Advocacy is important to help families detect signs early.
4. Teachers can help in identification of early problems in listening, reading, writing etc.
5. Advocacy is critically important in the society at large. Social attitude and the stigma commonly associated with mental disorders prevent authorities from effectively dealing with this

problem. The point is that society must allow each such individual to fulfill his or her potential as a productive citizen and to allow them to lead a life of dignity. This is their basic human right which societies should assure to each individual. Recent medical advances can assure such rights.

The Government of India has been working on the issue of mental health for a number of years. We have taken a number of initiatives. A Mental Health Policy was launched in 2014. And a new Mental Health Act was passed in 2017, earlier this year. This is a landmark Act and has a number of innovative features to address comprehensively the many aspects of mental health. The new approach is patient centric and emphasizes the role of the patients themselves in the management and treatment. The Act also recognizes the role of caregivers and patient's families, who also require support. The Act provides for the establishment of State and Central Mental Health Authorities which will register all Institutes providing such mental health care.

We already have a National Children Health Programme that covers the whole country. We have now decided that under the scope of this programme, we will add the element of screening the mental health of children.

The Government of India fully recognizes the importance of associating the private sector in the common efforts to deal with mental health issues. For example, the Indian Association of Paediatrics has developed screening and assessment tools to detect mental health disorders. They have already trained 250 Master Trainers. They have also developed National Guidelines for Autism and NDD. This is a good starting point and we hope that these initiatives will strengthen and develop in the years ahead.

What is the agenda before us and the roadmaps for the future? Firstly, we must maintain high-level political commitment and advocacy that will ensure the Schemes and the Policies we frame are fully funded. Then, we could consider the establishment of a National Task Force as a platform for public-private partnership.

The Government and the private sector could join hands to frame a comprehensive strategy for training of doctors, families, teachers and others connected with the issue. Research in various

neurodevelopmental dis-orders, including research in the effect of various interventions and drugs, could also be done effectively in this way. Eventually, we have to develop a comprehensive care protocol that would involve psychiatrists, paediatricians, neurologists, clinical psychologists, psychiatric nurses and other specialists.

As I said in the beginning, no country can deal with this issue on its own at present. Therefore, common advocacy, collaboration, cross-disciplinary and cross-country exchanges at bilateral and regional and multilateral level will be critical in the years ahead. In India, we would be very happy to be part of such a joint effort.

I believe that such inter-country collaboration can be coordinated by the WHO. I think we can safely conclude that there is a long road ahead of us and all of us have to put our hearts and minds to the problem.

With these initial remarks, I hand over the floor to my distinguished co-Chair.

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