

Evaluating Awareness of the Mental Healthcare Act, 2017 among Young in Pune

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Abstract: Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Mental health is a basic human right. And it is crucial to personal, community and socio-economic development. The present study was undertaken with main objective to measure the general awareness of youth about the mental health care act, 2017. Researcher collected primary data from college students from different institutions throughout the city Pune city. Researcher used a descriptive and quantitative research design. Total 60 respondents were selected for the present study and the data collected were processed using the SPSS software. Based on the data the findings indicate that majority of respondents are aware of the Mental Healthcare Act, 2017, a significant proportion lack adequate knowledge about its provisions, and only a few possess a comprehensive understanding. The data also reveal that most respondents consider it very important to include mental health education in the curriculum of all educational institutions. Therefore, the present study suggests that the integration of mental health education into academic curricula, along with awareness campaigns and outreach programs, is essential for improving the mental health conditions of youth in Pune.

Keywords: Mental Health, Awareness, Knowledge, Youth and Mental Healthcare Act, 2017

INTRODUCTION

Mental health is not merely a component of our overall health; it is its cornerstone. Strong mental health makes us more capable of making wise choices, forming wholesome relationships, and having a constructive influence on the world. Mental health is therefore a basic human right and is essential to both individual development and the advancement of society at large. Mental wellbeing advancement and avoidance are the foremost basic procedures for making strides well-being not fair by treating mental wellbeing issues after they emerge, but by effectively decreasing dangers and building strong situations that offer assistance individuals flourish. The Mental Healthcare Act of 2017 represents a significant

statutory and philosophical change in India's approach to mental health compared to the Mental Health Act of 1987. This evolution shows how the medical and institutional paradigm of mental health was replaced by a human rights-based model that complies with international norms and respects people's autonomy, rights. This development not only marks a change in legislation but also a change in the way that mental health is seen in India. But for the law to be fully effective, public awareness and implementation techniques must be strengthened, particularly among young people who will play a significant role in future discussions regarding mental health. The purpose of this study was to find out how much Pune's young youth knew about the Mental Healthcare Act of 2017, a law designed to provide better access to mental health services in India and safeguard the rights of those who suffer from the mental illness. The study was restricted to Pune city's young adults and college students. The fast-paced lifestyle, personal hardships, and academic pressure frequently expose young people to mental health issues, therefore it's critical to find out if they are aware of their rights and the support networks provided by the Act. Teachers, mental health advocates, and the legislators may find the study's conclusions helpful in creating workshops, awareness campaigns, or instructional initiatives aimed especially at youth.

REVIEW OF LITERATURE

BMC Psychiatry (2020). In their study on "Factors Affecting Stigma and Knowledge of Mental Health" revealed that young stigma and ignorance regarding mental health issues differ depending on their educational background and cultural beliefs. Younger people and those with less education might be less conscious and hold more stigmatized opinions.

Mazidul Islam & Md. Mazharul Islam Rakib (2020). In their study on "Awareness of Students About Mental Health" found that university students' knowledge of mental health concerns, 71.4% of them were able to identify signs of mental illness. However, awareness of the Mental Healthcare Act of 2017 was not expressly addressed in the questionnaire.

PATH (2022). In their study on "Youth Mental Health in India" found that significance of mental health awareness and the mental health needs of 252 million young people in India. According to the survey, teenagers still have little particular understanding about the Mental Healthcare Act of 2017, despite increased awareness. India's young population, which comprises about 252 million individuals between the ages of 10 and 24, has mental health requirements and challenges. This is the subject of the PATH (2022) report, "Spotlight on young Mental Health in India." A thorough assessment of the state of mental health is given

in the report, covering topics such as youth policy awareness, stigma, service accessibility, and awareness levels.

METHODOLOGY

The present study was conducted in Pune city among young individuals aged 18 to 30 years residing in Pune, particularly college students, as they constitute a significant demographic for evaluating awareness of the Mental Health Care Act, 2017. A simple random sampling method was applied to choose participants from a roster of college students. The descriptive and quantitative research design was used for the study. The collected data were processed by using statistical tools like Frequency, Percentage, S.D., Mean, and Chi-square test

Research Hypothesis:

Youth in Pune have limited awareness about the mental health care act, 2017.

RESULT AND DISCUSSION

Table 1: Distribution of respondents according to their age.

Sr. No	Age	Frequency	Percent (%)
1	19 - 21	10	16.70
2	22 - 24	22	36.60
3	25 – 27	19	31.70
4	28 - 30	09	15.00
Total		60	100.00

Table 1 presents the age distribution of respondents. Majority of respondent were found in 22-24 age group i.e. 36.6 percent followed by 25-27 age group i.e. 31.7 percent, 16.7 percent of respondent were 19-21 year old age and 15.00 percent of respondent were from 28to 30 age group.

Table 2: Distribution of respondents according to their gender.

Sr. No	Gender	Frequency	Percent (%)
1	Male	30	50.00
2	Female	30	50.00
Total		60	100.00

Table 2 shows the gender distribution of respondents: 30 (50%) were male and 30 (50%) were female, indicating equal representation of both genders.

Table 3: Distribution of respondents according to their current level of education.

Sr. No	Education.	Frequency	Percent (%)
1	High school	03	05.00
2	Undergraduate	22	36.7
3	Postgraduate	35	58.3
Total		60	100.00

Table 3 shows respondents' current level of education. Most respondents are postgraduates (35; 58.3%), followed by undergraduates (22; 36.7%), while a small proportion are high school students (3; 5%).

Table 4: Distribution of respondents according to have they ever heard about the mental health care act 2017.

Sr. No	Have they ever heard about the mental health care act 2017.	Frequency	Percent (%)
1	Yes	36	60.00
2	No	24	40.00
Total		60	100.00

Table 4 shows respondents' awareness of the Mental Healthcare Act, 2017. A majority, 36 (60%), are aware of the Act, while 24 (40%) are not aware.

Table 5A: Distribution of respondents according to how they would rate their overall knowledge of the mental health care act 2017.

Sr. No	How would they rate their overall knowledge of the mental health care act 2017.	Frequency	Percent (%)
1	Very poor	2	03.30
2	Poor	19	31.70
3	Average	16	26.70
4	Good	16	26.70
5	Very Good	7	11.70
Total		60	100.00

Table 5A presents respondents' overall knowledge of the Mental Healthcare Act, 2017. Most respondents fall in the poor (31.7%) and average/good (26.7% each) categories, while 11.7% have very good knowledge and only 3.3% have very poor knowledge.

Table 5B: Distribution of respondents according to how they would rate their overall knowledge of the mental health care act 2017.

Sr. No	How would they rate their overall knowledge of the mental health care act 2017.	Frequency	Percent (%)
1	Rights of individuals with mental health conditions	14	23.30
2	Involuntary treatment/ admission	6	10.00
3	Protection against discrimination	11	18.30
4	Access to mental health services	11	18.30
5	I do not know any provisions	18	30.0
Total		60	100.0

Table 5B shows respondents' knowledge of the provisions of the Mental Healthcare Act, 2017. While some are aware of specific provisions—such as rights of individuals (23.3%), protection against discrimination and access to services (18.3% each), and involuntary treatment (10%)—a majority (30%) do not know any

Table 6: Distribution of respondents according to which rights do the mental health care act 2017 provides for individuals with mental health issues.

Sr. No.	Which rights do the mental health care act 2017 provide for individuals with mental health issues.	Frequency	Percent (%)
1	Right to receive treatment in a mental health facility	24	40.0
2	Right to refuse treatment	5	08.30
3	Right to not be discriminated against	7	11.70
4	Right to legal representation	6	10.00
5	I do not know any rights	18	30.00
Total		60	100.0

Table 6 presents respondents' awareness of rights under the Mental Healthcare Act, 2017. While 40% are aware of the right to receive treatment, smaller proportions know about the right to not be discriminated against (11.7%), legal representation (10%), and refusal of treatment (8.3%). Notably, 30% of respondents are unaware of any rights.

Table 7: Distribution of respondents according to whether they think the Mental Health Care Act 2017 helps reduce stigma around mental health.

Sr. No	Whether they think the Mental Health Care Act 2017 helps reduce stigma around mental health.	Frequency	Percent (%)
1	Yes	56	93.30
2	No	04	06.70
Total		60	100.00

Table 7: presents respondents' opinions on whether the Act helps reduce mental health stigma.

Table no 8: Distribution of respondents according to how often they came across information about the Mental Health Care Act 2017

Sr. No	How often they came across information about the Mental Health Care Act 2017.	Frequency	Percent (%)
1	never	04	06.70
2	rarely	24	40.00
3	occasionally	14	23.30
4	frequently	13	21.70
5	very frequently	05	08.30
Total		60	100.00

Most respondents (93.3%) agreed that it helps reduce stigma, while a small proportion (6.7%) disagreed

Table 8 shows how often respondents come across information about the Act. A majority, 24 (40%), reported that they rarely encounter such information. Meanwhile, 14 (23.3%) come across it occasionally and 13 (21.7%) frequently. A smaller number, 5 (8.3%), experience it very frequently, while 4 (6.7%) said they never come across it.

Table 9: Distribution of respondents according to have they ever read the Mental Health Care Act 2017 or any of its documents.

Sr. No	Have they ever read the Mental Health Care Act 2017 or any of its documents.	Frequency	Percent (%)
1	Yes	31	51.70
2	No	29	48.30
Total		60	100.00

Table 9 shows respondents' awareness of documents related to the Act. A slight majority, 31 (51.7%), have read such documents, while 29 (48.3%) have never heard of them.

Table 10: Distribution of respondents according to which sources they have used to gather information specifically about the Mental Health Care Act 2017.

Sr. No	Which sources they have used to gather information specifically about the Mental Health Care Act 2017.	Frequency	Percent (%)
1	Social media	15	25.0
2	Internet articles/ blogs	2	03.30
3	News	7	11.70
4	Educational institutions	13	21.70
5	Mental health organisations	10	16.70
6	Family/ friends	5	08.30
7	Health professionals	8	13.30
Total		60	100.00

Table 10 presents the sources from which respondents obtain information about the Act. Social media is the most common source (15; 25%), followed by educational institutions (13; 21.7%) and mental health organizations (10; 16.7%). Other sources include health professionals (8; 13.3%), news (7; 11.7%), family and friends (5; 8.3%), and internet articles and blogs (2; 3.3%).

Table 11: Distribution of respondents according to how often they read articles or blogs on mental health on the internet.

Sr. No	How often they read articles or blogs on mental health on the internet.	Frequency	Percent (%)
1	never	10	16.70
2	rarely	16	26.70
3	occasionally	21	35.00
4	frequently	7	11.70

5	always	6	10.00
Total		60	100.00

Table 11 shows how often respondents read mental health articles or blogs on the internet. Most respondents, 21 (35%), read them occasionally, followed by 16 (26.7%) who rarely do. Meanwhile, 10 (16.7%) never read such content, 7 (11.7%) read it frequently, and 6 (10%) always do.

Table 12: Distribution of respondents according to how frequently they attended mental health-related events (seminars, workshops, etc.).

Sr. No	How frequently they attended mental health-related events (seminars, workshops, etc.).	Frequency	Percent (%)
1	Never	12	20.00
2	Rarely	17	28.30
3	Occasionally	16	26.70
4	Frequently	10	16.70
5	Very frequently	5	08.30
Total		60	100.00

Table 12 shows how often respondents attend mental health-related events. Most respondents attend rarely (17; 28.3%) or occasionally (16; 26.7%). Meanwhile, 12 (20%) never attend such events, 10 (16.7%) attend frequently, and only 5 (8.3%) attend very frequently.

Table 13: Distribution of respondents according to how often they consult health professionals (doctors, counsellors) for information on mental health.

Sr. No	How often they consult health professionals (doctors, counsellors) for information on mental health.	Frequency	Percent (%)
1	never	17	28.3

2	rarely	19	31.7
3	occasionally	10	16.7
4	frequently	12	20.00
5	very frequently	2	03.30
Total		60	100

The above table no 13 shows the information about the respondents how often they consult health professionals for information on mental health. The above data shows that 17(28.3%) of the respondents never consult the health professionals for information on mental health. 19(31.7%) of the respondents rarely consult the health professionals. 10(16.7%) of the respondents occasionally consult health professionals. 12(20%) of the respondents frequently consult health professionals. 2(3.3%) of the respondents very frequently consult health professionals.

Table 14: Distribution of respondents according to they think if there is enough awareness about the Mental Health Act in their community or educational institution.

Sr. No	Do they think if there is enough awareness about the Mental Health Act in their community or educational institution.	Frequency	Percent (%)
1	Yes	18	30.00
2	No	42	70.00
Total		60	100.00

Table 14 shows respondents' views on awareness of the Mental Health Act. A majority, 42 (70%), believe there is not enough awareness in their community or educational institution, while 18 (30%) feel that awareness is sufficient.

Table 15: Distribution of respondents according to how comfortable are they discussing mental health with friends or family.

Sr. No	How comfortable are they discussing mental health with friends or family.	Frequency	Percent (%)
1	Very uncomfortable	05	8.30
2	Uncomfortable	04	6.70
3	Neutral	21	35.00
4	Comfortable	20	33.30
5	Very comfortable	10	16.7
Total		60	100.00

Table 15 shows respondents' comfort level in discussing mental health with friends or family. Most respondents are neutral (21; 35%) or comfortable (20; 33.3%), while 10 (16.7%) are very comfortable. A smaller proportion feel uncomfortable, with 5 (8.3%) very uncomfortable and 4 (6.7%) uncomfortable.

Table 16: Distribution of respondents according to if they believe mental health issues are often stigmatized in society.

Sr. No	Do they believe mental health issues are often stigmatized in society	Frequency	Percent (%)
1	Yes	49	81.70
2	No	11	18.30
Total		60	100.00

Table 16 shows respondents' views on stigma related to mental health. A large majority, 49 (81.7%), believe mental health issues are often stigmatized in society, while 11 (18.3%) do not share this view.

Table 17: Distribution of respondents according to do they believe that discussing mental health openly can help in reducing stigma.

Sr. No	Do they believe that discussing mental health openly can help in reducing stigma	Frequency	Percent (%)
1	Yes	54	90.00
2	No	6	10.00
Total		60	100.00

Table 17 shows respondents' views on reducing stigma through open discussion. A strong majority, 54 (90%), believe that openly discussing mental health can help reduce stigma, while 6 (10%) do not agree.

Table 18: Distribution of respondents according to how important do they think mental health awareness is among they in India.

Sr. No	How important do they think mental health awareness is among they in India.	Frequency	Percent (%)
1	Not important	1	1.7
2	Slightly important	1	1.7
3	Neutral	7	11.7
4	Important	22	36.7
5	Very important	29	48.3
Total		60	100.00

Table 18 shows respondents' views on the importance of mental health awareness among youth in India. A large majority consider it important or very important, with 22 (36.7%) rating it as important and 29 (48.3%) as very important. Meanwhile, 7 (11.7%) are neutral, and only 1 (1.7%) each consider it slightly important or not important.

Table 19: Distribution of respondents according to how often they participate in mental health awareness activities or campaigns.

Sr. No	Do they participate in mental health awareness activities or campaigns	Frequency	Percent (%)
1	Never	12	20.00
2	Rarely	17	28.30
3	Occasionally	14	23.30
4	Frequently	12	20.00
5	Very frequently	05	08.30
Total		60	100

Table 19 shows how often respondents participate in mental health awareness activities or campaigns. Most respondents participate rarely (17; 28.3%) or occasionally (14; 23.3%). Meanwhile, 12 (20%) never participate, another 12 (20%) participate frequently, and 5 (8.3%) participate very frequently.

Table 20: Distribution of respondents according to how important do they think it is for mental health education to be included in the school/college curriculum.

Sr. No	How important do they think it is for mental health education to be included in the school/college curriculum	Frequency	Percent (%)
1	not important	1	1.7
2	slightly important	1	1.7
3	neutral	14	23.3
4	important	17	28.3
5	very important	27	45
Total		60	100

Table 20 shows respondents' views on including mental health education in school/college curricula. A majority consider it important or very important, with 17 (28.3%) rating it as important and 27 (45%) as very important. Meanwhile, 14 (23.3%) are neutral, and only 1 (1.7%) each feel it is slightly important or not important.

Table 21: Distribution of respondents according to how likely are they to recommend mental health awareness programs to their peers.

Sr. No	How likely are they to recommend mental health awareness programs to their peers	Frequency	Percent (%)
1	Unlikely	02	03.30
2	Neutral	20	33.30
3	Likely	30	50.00
4	Very likely	08	13.30
Total		60	100

Table 21 shows respondents' willingness to recommend mental health awareness programs to their peers. Half of the respondents (30; 50%) are likely to recommend them, while 8 (13.3%) are very likely. Meanwhile, 20 (33.3%) are neutral, and a small proportion, 2 (3.3%), are unlikely to recommend such programs.

Table 22: Distribution of respondents according to them feels that the government should allocate more resources for mental health awareness and treatment.

Sr. No	They feel that the government should allocate more resources for mental health awareness	Frequency	Percent (%)
1	yes	53	88.3
2	no	7	11.7
Total		60	100

Table 22 shows respondents' opinions on government funding for mental health. A large majority, 53 (88.3%), agree that the government should allocate more resources for mental health awareness and treatment, while 7 (11.7%) do not agree.

Table 23: Distribution of respondents accords to would they participate in a national campaign to raise awareness about mental health.

Sr. No	Would they participate in a national campaign to raise awareness about mental health.	Frequency	Percent (%)
1	Yes	47	78.30
2	No	13	21.70
Total		60	100.00

Table 23 shows respondents' willingness to participate in a national mental health awareness campaign. A majority, 47 (78.3%), are willing to participate, while 13 (21.7%) are not willing to do so.

Table 24: Distribution of respondents according to what they thought the current mental health laws in India are effective in protecting the rights of individuals with mental health conditions

Sr. No	What they thought the current mental health laws in India are effective in protecting the rights of individuals with mental health conditions.	Frequency	Percent (%)
1	yes	44	73.3
2	no	16	26.7
	Total	60	100

Table 24 shows respondents' perceptions of the effectiveness of mental health laws in India. A majority, 44 (73.3%), believe that the current laws are effective in protecting the rights of individuals with mental health conditions, while 16 (26.7%) do not agree.

IMPLICATIONS

1. Integration of Mental Health Education in Academic Curriculum.
2. Awareness Campaigns and Outreach Programs
3. Establishment of Mental Health Clubs and Peer Support Groups.

4. Faculty and Counsellor Training.

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