"MENTAL HEALTH IN INDIA CHALLENGES AND OPPORTUNITIES"

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ABSTRACT

Mental health includes our emotional, psychological and social well-being. It affects how we think, feel and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from Childhood and adolescence through adulthood. We often think of our mind and body as separate, but own mental health and physical health are interconnected. Physical health problems significantly increase our risk of developing mental health problems and vice versa.

In 2017, the President of India, **Sri Ram Nath Kovind** asserted that India was "facing a possible mental health epidemic." A study revealed that in the same year, 14% of India's population suffered from mental health ailments including 45.7 million suffering from depressive disorders and 49 million from anxiety disorders. The COVID-19 Pandemic has further accerituated the mental health crisis with reports from across the world suggesting that the virus and associated lock downs were having a significant impact on the population particularly younger individuals. Not only in our country but globally the majority of those who need mental health care worldwide lack access to high quality mental health service. Stigma human resource shortage fragmented service, delivery models, and lack of research capacity for policy implementation and change contribute to the current mental health treatment gap. Mental disorders are now among the top leading causes of health burden worldwide, with no evidence of global reduction since 1990. In this article, I will describe, the state of mental health in India, the Cost of the mental health crisis to the economy and further identify challenges and priority areas for future research.

INTRODUCTION

The world health refers to a state of complete emotional and physical well-being. Good health is central to handling stress and living a longer, more active life.

In 1948, The World Health Organization (WHO) defined health as:-

"Health in a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.

In 1986, the WHO made further clarifications:-

"A resource for everyday live, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities."

This means that health is a resource to support an individual's function in wider society, rather than an end in itself. A healthful lifestyle provides the means to lead a full life with meaning and purpose. Mental and physical health are equally important components of overall health. For example, depression increases the risk for many types of physical health problems, particularly long- lasting conditions like diabetes, heart disease and stroke. Similarly, the presence of chronic conditions can increase the risk for mental illness. So it is clear that, Physical health problems significantly increase our risk of developing mental health problems and vice versa. Nearly one in three people with a long term physical health condition also has a mental health problem most often depression or anxiety. Our bodies and minds are not separate, so it's not surprising that mental ill health can affect our body.

In recent years, there has been increasing acknowledgement of the important role mental health plays in achieving global development goals, as illustrated by the inclusion of mental health in the Sustainable Development Goals. Mental disorders are now among the top leading causes of health burden worldwide, with no evidence of global education since 1990.

In 2017, an estimation of the burden of mental health conditions for the states across India revealed that as many as 197.3 million people required care for mental health conditions. This included around 45.7 million people with depressive disorders and 44.9 million with people anxiety disorders. The situation has been exacerbated due to the Covid-19 pandemic, making it a serious concern world over. The staggering figures, however, are void of millions of others directly or indirectly impacted by the challenge and those who face deep rooted stigma, many times rendering them unable to seek help. Since the onset of Covid-19 pandemic, several reports have indicated a worsening of mental health issues among individuals across age groups. The Economic Survey of India has yet to address mental health in a substantial manner after the implementation of the Act with the only mention of mental health in this period being a cursory reference in the contex of information asymmetry in healthcare and changes in the approach to medicine. during the Covid-19 pandemic. (Economic survey- 2020-21). There is an urgent need to counter the notion that mental health exclusively means the absence of mental illness. In this article, I will describe the state of mental health in India, the cost of mental health

crisis to the economy and further identify challenges and priority areas for future research.

THE STATE OF MENTAL HEALTH IN INDIA

The World Health Organization (WHO) defines mental health as a state of well-being, where an individual realises their capabilities, can cope with the normal stressors of life, work productivity and is able to contribute to their community. Mental illness is amalgamation of biological, social, psychological, hereditary and environmental stressors. Mental health is an integral part of health, it is more than the absence of mental illnesses. It is the foundation for well-being and effective functioning of individuals. It includes mental well-being prevention of mental disorders, treatment and rehabilitation.

WHO estimates that the burden of mental health problems in India is 2443 disability adjusted life year (DALYs) per 1,00,000 population, the age adjusted suicide rate per 1,00,000 population is 21.1. The economic loss due to mental health conditions, between 2012 - 2030, is estimated at USD 1.03 trillion. A study by the India State Level Disease Burden Initiative showed that the disease burden in India due to mental disorders increased from 2.5% in 1990 to 4.7 % in 2017 in terms of DALYs (Disability Adjusted Life Years), and was the leading contribution to YLDs (Years lived with disability) contributing to 14.5% of all YLDs in the Country (India State-Level Disease Burden Initiative 2017). The prevalence of depression and anxiety disorders, as well as eating disorders, was found to be significantly higher among women. The association between depression and death by suicide was also found to be higher among women. An analysis based gender revealed that more women suffered from mental health issues than men. Around 3.8% of men and 3% of women faced anxiety disorders due to bullying and victimisation. Unfortunately, 5% of men and about 8.3% of women were vulnerable due to childhood sexual abuse. According to statista, on average 14% of Indians suffer from variations of mental health disorders in the country. Studies have predicted that as much as 10.8% of children in states like Uttar Pradesh, Madhya Pradesh, Bihar and Assam suffer from reduced brain development. It is no surprise that the state of mental health of a country, correlates positively with its economic growth. Projections show that India will suffer massive economic losses owing to mental health, Conditions. As of 2015, on a global level, over 322. 48 million people worldwide suffer from some form of depressive disorder and as of 2017 more than 14 % of the total population" in India suffer from Variations of mental disorders. The majority of this share includes older adult female in India.

In India, every seventh person suffers from some form of mental disorder. The implications of living in quarantine as a result of the covid-19 pandemic lockdown in India was not only a stress trigger but also had negative psychological effects on the population. Indians learnt to adapt to the new normal which affected every dimension their lifestyle i. e. levels of physical activity, sleep cycles, nutrition and their social lives. In an attempt to cope with this paradigm shift, long bouts of stress caused by enforced isolation, financial stress, job cuts along with unhealthy lifestyles were the precursors for depression and anxiety. In

addition, those already victim to these disorders, prior to the pandemic, found their conditions to be exacerbated, as a result of social isolation and reglect due to overworked healthcare Systems.

ATTITUDE TOWARDS MENTAL ILLNESS IN INDIA

- People with mental illnesses should not be given any responsibility. → 68%
- One of the main causes of mental illness is the lack of self-discipline and will power→ 60%
- Mentally unhealthy people should have their own groups healthy people need not be contaminated by them→ 60%
- Most women who were once patients in a mental hospital cannot be trusted as baby sitters. → 49%
- One should keep safe a distance from someone who is depressed→ 46%
- People suffering from mental illness are always - violent." → 44%
- Sitting with / talking to a mentally unhealthy person could deteriorate the mental health of a healthy person.→ 41%
- It is frightening to think that people with mental problems live in our neighbourhoods. →40%

[Source-Internet]

India has one of the highest prevalences of mental illnesses s globally. The National Mental Health Survey 2016 found that close to 14% of India's population required active mental health interventions. Every year about 2,00,000 Indians take their lives. The statistics are even higher if one starts to include the number of attempts to suicide. The rapid modernisation, Urbanisation and economic boom has led to India becoming the fifth- largest economy globally, However, Statistics also show that a large chunk of the Indian population suffers from mental health issues. One in every seven Indians suffered from some depressive or anxiety disorder. The numbers have likely doubled between the early 2000 and the end of the last decade.

A Study published by The Lancet examined the state wise burden of mental health. Nearly 45 million people suffered from mental health disorders, and most Indian states that housed a large part of population showed a low progress performance in the Index. States like Maharashtra and several north-eastern states bear a heavier burden of mental health issues amongst their citizens that the country's central & northern states. Kerela, Karnataka, Telangana, Tamil Nadu, Himachal Pradesh, Maharashtra, Andhra Pradesh, Manipur and West Bengal have the highest prevalence of anxiety disorders, the study reported. Ironically, maintaining good overall well-being is still a luxury in a country like India.

REASONS FOR TREATMENT GAP IN MENTAL HEALTH IN INDIA

1) **MENTAL HEALTHCARE**
   a) Deficiencies and lack of implementation of and state policy initiatives.
   b) Biomedical approach
   c) Lack of community participation
   d) Lack of coordination at different levels.

2) **LACK OF MENTAL HEALTHCARE RESOURCES**
   a) Lack of availability
   b) Poor attitudes
   c) Lack of knowledge.
   d) Lack of training for healthcare providers.

3) **SOCIAL-ECONOMIC BURDEN OF MENTAL ILLNESS**
   a) Stigma
   b) Gender
   c) Economic costs of treatment

4) **BELIEFS, EXPLANATIONS AND HELP SEEKING BEHAVIOURS**
   a) Non-medical expiations of mental illness
   b) Easy accessibility of traditional healing resources.

5) **VIOLATION OF HUMAN RIGHTS**
   a) Role of public interest litigations (PIL) and judicial intervention

[Source: Internet]

("Treatment Gap in Mental Healthcare Reflections from Policy and Research" published in the Economic & Political Weekly (EPW), 2017)

In India, according to NIMHANS data, more than 80% of people do not access care services for a multitude of reasons, ranging from lack of knowledge, stigma and high cost of care. The actual problem could be more complicated but a beginning has been made. The Union budget 2022-23 took the consideration the issue of mental health and announced The National Tele-Mental Health Programme in India, for 24X7 free tele counselling services. While the parliamentary announcement is a welcome change, there is a need to invest more in mental

health needs across India. As of today, the allocated budget is about INR 932.13 crores, but this is desperately short of estimates provided by mental health experts. Mental health literacy is the gateway for mental health interventions in India. There is a lack of awareness which can lead to overlooking, misjudging or dismissing the signs that someone needs help.

Mental disorders place a considerable economic burden on those suffering from them - the NMHS (2015-16) revealed that the median   out-of-pocket expenditure by families on treatment and travel to access care was Rs 1,000–1,500 per month. Discussions with respondents also revealed that expenditure incurred on treatment of mental disorders often drove families to economic hardship. This burden was more pronounced middle aged individuals who were also most affected by mental disorders- as it affects, their productivity thereby amplifying the burden not just on the individual, but also the economy The NMHS also found that mental health disorders. disproportionately affect households with lower income, less education, and lower employment. These vulnerable groups are faced with financial limitations. due to their socio-economic conditions, made worse by the limited resources available for treatment.

Lack of state services and insurance coverage results in most expenses on treatment when sought being out of pocket expenses, thus worsening the economic strain on the poor and vulnerable.

The Mental Healthcare Act, 2017 makes several provisions to improve the state of mental health in India. This Act rescinds The Mental Healthcare Act, 1987 which was criticised for failing to recognise the rights and agency of those with mental illness (Mishra & Galhotra 2018). This includes stating to mental healthcare as a "right" and instituting Central and State Mental Health Authorities (SMHA), which would focus on building robust infrastructure including registration of mental health practitioners and implementing service delivery norms. Although the Act required states to set up an SMHA in nine months of the Act being passed, as of 2019, only 19 out of 28 states had constituted a SMHA. As of 2021, only a few states included a separate line item in their budgets towards mental health infrastructure. Developed countries allocate 5-18% of their annual healthcare budget on mental health, while India allocates roughly 0.05%

As is evident above, significant challenges remain in order to close the mental health treatment gap to make serious strides toward improving mental health globally. Four specific barriers that require particular attention:-

a) Capacity Building
b) Reducing Mental illness Stigma
c) An integrated framework for Prevention of Mental Disorders
d) Scale up, Sustainability and policy

Four priority areas are identified for focused attention to diminish the mental health treatment gap and to improve access to high- quality mental health Services:-

1. Diminishing pervasive stigma.
2. Building mental health care system treatment and research capacity.
3. Implementing prevention programs to decrease the incidence of mental disorders.
4. Establishing sustainable scale up of public health systems to improve access to mental health treatment using evidence-based interventions.

SUGGESTIONS

Some other Suggestions to improve the mental health in our country and to reduce the global burden of mental disorders, reduce inequalities in mental health and also improve mental health and well-being for all are as follows:-

A) The concept of proportionate universalism is a way of overcoming the limitations of targeted programmes while providing action which is proportionate to the level of need across the gradient.

B) The reduction of health inequalities will be achieved most effectively through the prioritization of health equity in all policies across all sectors.

C) Reducing inequalities in mental health cannot be achieved without reducing inequalities in physical health. Therefore a social determinants of health approach should consider both mental and physical health implications within all actions to tackle health inequalities.

D) Thene is a need for mental health to be given greater priority in all countries across the world. In particular, the priority accorded to mental health needs to be rised in poorly low and middle-income countries, where the issue is often poorly understood and/or not recognised as major health concern.

E) Reducing inequalities in mental health is a task that must be taken on by the whole of government and across all sectors. Therefore, it is important that all policies across all sectors ensure that their programmes and strategies will not harm & potentially reduce mental health inequalities.

F) To implement action prevent and ameliorate mental disorders at the local level, it is necessary to build systems and processes to provide information for action at the local level.

G) Appropriate prevention interventions and strategies must be appropriate to different stages of life.

CONCLUSION

Good mental health is integral to human health and well-being. A person's mental health and many common mental disorders are shaped by social, economic and physical environments. Risk factors for many common mental disorders are heavily associated with social inequalities, whereby the greater the inequality the higher the inequality in risk. In order to reduce these inequalities and reduce the incidence of mental disorders overall, it is vital that action is taken to improve the conditions of everyday life, beginning before birth and progressing into early childhood, older childhood and adolescence, during family building and working ages and through to older age. Actions throughout these life stages would provide opportunities for both improving population mental health and for reducing risk of those mental disorders that are associated with social inequalities. As this important issue gains attention, there is a need for a multi stakeholder engagement to tackle the various challenges, from all fronts. Increased investment is required on all fronts:- for mental health awareness to increase understanding and reduce stigma, for efforts to increase access to quality mental health care and effective treatments and for research to identify new treatments and. improve existing treatments for all mental disorder.

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