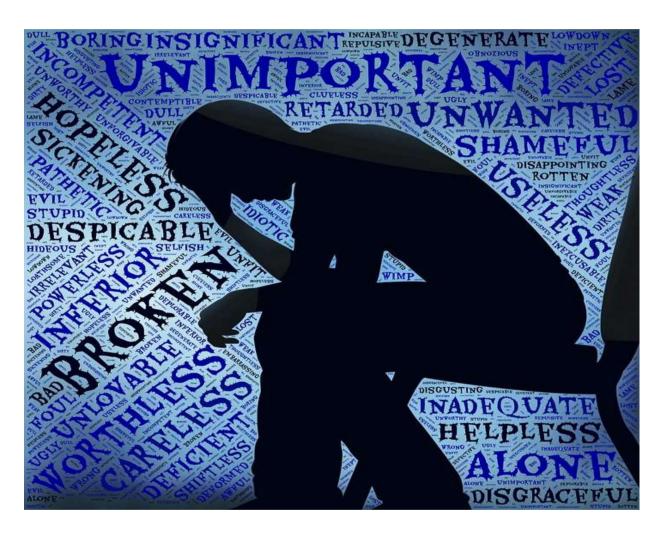
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Death in Silence: The Urgency to Address the Inadequate Mental Health Care in India



(Source- http://dynamicinterventionllc.com/depression/)

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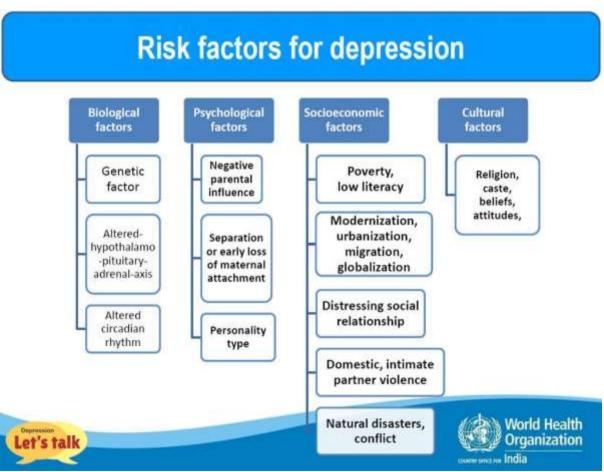
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Lead Essay

Death in Silence: the urgency to address the inadequate Mental Health Care in India

Health has been defined by the World Health Organisation (WHO) as the 'state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'. Hence, to promote the wellbeing of all human beings, the World Health Day is celebrated every year on 7th April to mark the founding anniversary of WHO. This day provides an opportunity for the organisation to rally action around a specific health topic of concern to people all over the world. This year the theme of the campaign is Depression: let's talk. It

Depression is an 'illness characterized by persistent sadness and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least two weeks'. It causes mental anguish and affects people of all ages, from all walks of life, in all countries. The risk of becoming depressed is increased by poverty, unemployment, life events such as the death of a loved one or a relationship break-up, physical illness and problems caused by alcohol and drug use. It can lead to people suffering from depression to commit suicide, which is now the second leading cause of death among 15-29 year olds. However, depression is absolutely preventable and can be treated.



(Source- http://www.downtoearth.org.in/blog/depression-s-other-face-57532)

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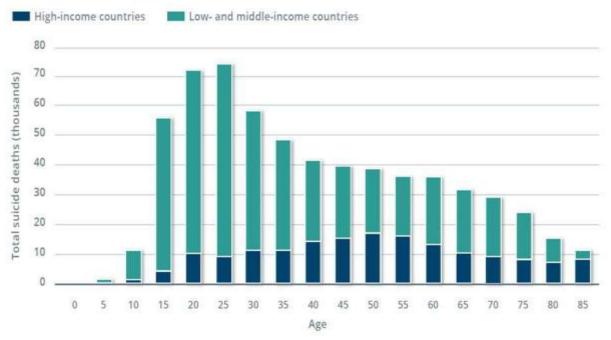
Lead Essay

The accelerating indicators of Depression in India

Globally, the total number of people suffering from depression was estimated to exceed 300 million in 2015. This is about 4.4% of the world's population. This is an 18 per cent increase between 2005 and 2015. Untreated depression is the leading cause of over 788,000 suicides that occur worldwide every year, roughly corresponding to one death in every 45 seconds. In India, over 58 million people (or 4.5%) people suffer from depression. According to the Global Burden of Disease Study, depression became India's tenth-biggest cause of early deaths in 2015. It moved up by two positions from 12th in 2005. Moreover, it is a matter of concern that it is more common among women (5.1%) than men (3.6%), and they are less likely to seek help or avail of treatment. This is primarily because those suffering from depression find it difficult to come forward, and those around them find it difficult to recognise it. Many in India still don't recognise depression as an ailment that can be treated and controlled.

According to the data, in 2016, Psychiatrists wrote over 9.4 million new prescriptions for antidepressants. This has increased by 12% from 8.4 million in 2015. Similarly, the data provided by AIOCD Pharmasofttech AWACS, a pharmaceutical market research company, shows that the sale of these drugs has shot up by over 30% in the last four years – from Rs 760 crore in 2013 to Rs 1,093 crore in 2016. ix

Global suicides, by age and country income level (thousands)



 $(Source-\underline{http://www.downtoearth.org.in/news/depression-while-some-make-recovery-for-others-it-is-darkness-all-around-\\ \underline{57535?platform=hootsuite}\)$

Access to Mental Healthcare

According to the National Mental Health Survey, conducted by the National Institute of Mental Health and Neurosciences, it was reported that despite three out of four persons experiencing severe mental disorders, there are huge gaps in treatment. This has been reported due to the stigma associated with mental disorders, and nearly 80 per cent of those with mental disorders had not received any treatment despite being ill for over 12 months. The large gap in the treatment is the consequence of the poor implementation of the National Mental Health Programme (NMHP) which is largely responsible for this. The Programme was launched in 1982 by the Government of India to ensure the

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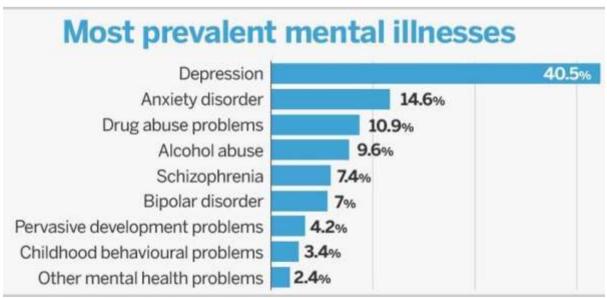
availability and accessibility of minimum mental health care for all, to promote community participation to simulate self-help in the community. xi

The District Mental Health Programme (DMHP) which was launched under NMHP in 1996 with the objective for early detection and treatment, providing short-term training to general physicians, public awareness generation and monitoring. However, it covers merely 200 districts so far. Moreover, there are over 443 public mental hospitals in India, but six states, mainly in the northern and eastern regions with a combined population of 56 million people, are without a single mental hospital, whereas other states have several mental hospitals. It is also noted that the NGOs that provide mental health services are also concentrated in the southern and western regions of the country. Still

After a National-level survey conducted in 2002, certain norms were fixed by the government, including doctor-patient ratio. According to these norms, one psychiatrist, 1.5 clinical psychologist and two psychiatry social workers were considered per lakh population, and one nurse for a ward of 10 psychiatry beds. However, the professional medical work force is severely scarce in India. It is about 0.3% trained psychiatrists as opposed to 1% requirement and 0.7% clinical psychologists, when the need is for at least 1.5%. xiv

According to a Lok Sabha reply by the Minister of Health and Family Welfare in December 2015, there are about 3,800 psychiatrists, 898 clinical psychologists, 850 psychiatric social workers and 1,500 psychiatric nurses nationwide. This means there are about three psychiatrists per million people, which is 18 times fewer than the commonwealth norm of 5.6 psychiatrists per 100,000 people. By these estimates, India is short of 66,200 psychiatrists. Similarly, based on the global average of 21.7 psychiatric nurses per 100,000 people, India needs 269,750 nurses.^{xv}

It is also a matter of concern that the spending on the mental healthcare in India is merely 0.06% of its health budget. This is less than Bangladesh (0.44%). According to a WHO report of 2011, most developed nations spend above 4% of their budgets on mental-health research, infrastructure, frameworks and talent pool. *vi According to a study published in the Lancet, has projected that a US \$147-billion investment in scaling up treatment for depression and anxiety could result in improved labour force participation and productivity worth \$399 billion. This global return on investment analysis has been based on the treatment costs and health outcomes of 36 countries between 2016 and 2030.*vii Therefore, a greater spending on the mental healthcare of the people is not only essential for the well-being of the people but it will also positively impact the economy of the country.



 $(Source-\underline{http://www.hindustantimes.com/health-and-fitness/world-health-day-the-great-depression-understanding-the-cause-of-suicides-in-india/story-4R4b8T6iFFGxmtvB36iqmK.html~)$

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Lead Essay

Legislation on Mental Health in India

The Mental Health Care Bill 2016 which was passed by the Parliament in March 2017 decriminalises suicide and empowers the mentally ill person to choose a mode of treatment, to refuse institutionalisation, and nominate somebody to ensure that their wishes are carried out. Additionally, it also bans the use of degrading treatments such as, the shock therapy on children, and it specifies that adults be subjected to them only after the administration of anaesthesia with the district medical board's consent. The Bill also guarantees every person suffering from mental illness the right to affordable, accessible and quality mental health care and treatment from mental health services run or funded by government. They also have the right to live with dignity and protection from cruel and inhuman treatment. With the above provisions in Bill, it is expected that the new legislation will assist in removing the stigma against depression and mental disorders from our society and would probably provide for mental health care.

The way forward

The mental well-being of people in India needs to be immediately prioritised to meet the requirements and objectives laid down under the Mental Health Action Plan 2013–2020 of WHO. They have emphasised on an action plan for the World where 'mental health is valued, promoted and protected. Additionally, mental disorders are prevented and persons affected by these disorders are able to exercise the full range of human rights and to access high quality, culturally-appropriate health and social care in a timely way to promote recovery, in order to attain the highest possible level of health and participate fully in society and at work, free from stigmatization and discrimination'. xx

However, as it has been noted, the professional workforce for mental healthcare in India is not sufficient to address the rising demand. Also it is a matter of concern that people aged 15-29 year olds are highly susceptible to depression and other mental disorders, therefore, the Government needs to advocate for higher awareness about mental health in schools and colleges. In an article, Satyakant Trivedi, a psychiatrist, had recommended that it should be added to the school curriculum. As the children will be exposed to these disorders in their formative years, they will be able to seek help and speak out if subjected to depression later in their lives. Shaibya Saldanha, co-Founder of Enfold India, an NGO, also shared similar views and also emphasized on the need for better parenting during emotional crisis. Moreover, Universities and professional work environments in India still lack adequate counselling centres and well qualified trained counsellors and psychologists who can assist students and professionals at the initial stages of depression.

However, the measures to provide quality mental care help will not be possible without the adequate professionals spread evenly across the country. Therefore, the Government should firstly, increase the budgetary spending on the mental-health research, infrastructure, frameworks and talent pool to meet the Global standards. Secondly, more number of institutions and medical colleges need to be established to engage and train a greater number of psychiatrists, clinical psychologists, psychiatric social workers and psychiatric nurses, who can skilfully handle the mental health related problems in India.

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Headlines

Nine in every 10 children do not get adequate diet in Jharkhand, Bihar: NFHS data (Down to Earth, April 07, 2017)

Nine out of every ten children within the age-group of 6–23 months in Bihar and Jharkhand do not get adequate diet, as the latest National Family Health Survey (NFHS 4, 2015-16) data highlights. In a series of startling revelations, the nutrition and health status of children in the two states are found to remain critically low in comparison to the national standard, even though the trend recorded some welcome improvement compared to that of the previous NFHS data published almost a decade ago.

Only 7.5 per cent of children in Bihar and 7.2 per cent of children in Jharkhand within the age group of 6–23 months receive adequate diet, whereas in states like Tamil Nadu the situation is comparatively better as the figure stands at 31 per cent, according to the trend analysis done by CRY–Child Rights and You, based on the latest NFHS findings.

Read More: http://www.downtoearth.org.in/news/nine-in-every-10-children-do-not-get-adequate-diet-in-jharkhand-and-bihar-nfhs-

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Economy

Cash-for-votes row: Congress questions Centre on demonetisation effect over money distributed in RK Nagar

(Surpriya Bharatwaj, India Today, April 10, 2017)

While the Election Commission (EC) has cancelled the RK Nagar constituency by election in Tamil Nadu, the Congress has attacked the NDA government on demonetisation. The EC decided to rescind the by-poll late Sunday night, over reports of candidates buying votes through cash, gifts in kind. Upping the ante against the Modi government, Congress Rajya Sabha MP Renuka Chaudhary said, "The question needs to be asked from BJP and the PM. They have been claiming that demonetisation has been successful. Then where is this money coming from? The biggest question is whether the Indian currency is secure?"

Read More: http://indiatoday.intoday.in/story/rk-nagar-by-poll-cash-for-votes-congress-modi-demonetisation/1/924987.html

Date Accessed: 10.04.2017

Chidambaram questions: Was money paid to RK Nagar voters white?

(The Economic Times, April, 10, 2017)

Former Finance Minister P Chidambaram on Monday asked if Rs 100 crore distributed in cash to voters in R K Nagar of Chennai was black or white after the Election Commission indefinitely postponed the April 12 by-election to the assembly constituency following allegations that the ruling AIADMK had bribed electors in violation of the code of conduct.

The Congress leader also criticised the central government questioning if demonetisation had indeed put an end to black money in India.

Read More:

http://economictimes.indiatimes.com/articleshow/58105027.cms?utm_source=contentofinterest&utm_medium=text&utm_campaig_n=const_

Date Accessed: 10.04.2017

Cotton trade absorbed huge amounts of black money

(S. Harpal Singh, The Hindu, April 10, 2017)

While the common people continue to return morose from ATMs, those associated with Adilabad's huge cotton trade are laughing all the way to the banks, having 'successfully' laundered hundreds of crores of rupees in black money due to demonetisation. The timing of the ban on Rs, 500 and Rs. 1,000 currency notes turned out to be conducive for the latter which is becoming evident now when the government is busy collecting taxes on suspect transactions which took place during the period of demonetisation.

Read More: http://www.thehindu.com/news/national/telangana/cotton-trade-absorbed-huge-amounts-of-black-

money/article17901092.ece Date Accessed: 10.04.2017

Don't let money go down the drain

(Meera Siva, Business Line, April 10, 2017)

Come summer and many apartment complexes in several cities may run out of water. With soaring costs of tanker water, residents tend to run hefty water bills. However, a few simple techniques can help lower your water usage and cut your bill. Typical water usage is about 135 litres per person per day; 55 litres goes for bathing, another 30 litres towards toilet flushing, 40 litres for washing and cleaning (clothes, utensils) and another five litres each towards cooking and drinking.

You can install inexpensive water saving devices such as faucet heads, aerators, pressure regulators, low-flow shower heads and restrictors. For instance, you can retrofit devices such as aerators to your tap. It costs about ₹100-500 and when installed in the kitchen tap, water gets mixed with air, giving a soft bubbly flow, while reducing usage.

Read More: http://www.thehindubusinessline.com/portfolio/beyond-stocks/dont-let-money-go-down-the-drain/article9625522.ece

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Governance & Development

POLITICS AND GOVERNANCE

Prohibition has led to addiction to drugs: Bihar doctors find out

(Kaunain Sheriff M, The Indian Express, April 08, 2017)

Over the last year, Dr M E Haq, a general medical officer, logged at least 700 cases of alcohol addiction at the out-patient department of the de-addiction centre in Bihar's Gaya district. Around 85 per cent of these cases were treated at the district level after Bihar imposed total prohibition.

But now, Dr Haq is facing a new problem. The de-addiction centre, where he is posted, has started recording cases of substance abuse, ranging from cannabis, inhalants, and sedatives to opioids.

Read More: http://indianexpress.com/article/india/prohibition-has-led-to-addiction-to-drugs-bihar-doctors-find-out-4604463/

Date Accessed: 10.04.2017

The politics and economics of farm loan waivers

(R. Sukumar, Live Mint, April 09, 2017)

Politically, it makes eminent sense to announce a farm loan waiver now, in 2017. The next parliamentary elections are in 2019, not too far away. From a humanitarian perspective too, it is difficult to ignore the suffering of farmers.

Economically, though, it is difficult to make a case for loan waivers—simply because there is no case to be made. Some pundits have equated these with some corporate debt restructuring exercises, but the solution to sweetheart debt restructuring deals that banks get into with companies—the country's largest bank, State Bank of India, entered into one with Kingfisher Airlines in 2012—lies in prevention, not in compensating by offering similar sweetheart deals to farmers.

Read More: http://www.livemint.com/Opinion/3mZGNHjNOfhRXZoY0vokaK/The-politics-and-economics-of-farm-loan-politics-and-economics-a

waivers.html

Date Accessed: 10.04.2017

Liquor Ban on Highways: States Divided Along Political Lines?

(The Quint, 4 April, 2017)

The states that have and have not sought a re-look at the Supreme Court's verdict banning liquor vends within 500 metres of national and state highways, seem to be divided on political lines, even as the Centre has "unequivocally" supported the order. The apex court order passed last week also recorded that eight states, which are ruled by parties other than the BJP, had rushed to it for modification of the 15 December 2016 verdict. Later, Andhra Pradesh withdrew its application, saying the state government had accepted last year's judgement. Eighteen states have preferred not to file any application against the verdict.

Read More: https://www.thequint.com/india/2017/04/04/highway-liquor-ban-states-want-modification.

Date of Access: 10.04.2017

Government Intervention a Potential Risk for Sugar Producers

(The Livemint, April 10, 2017)

The government appears to have disagreed with the sugar industry's contention on imports. While sugar output is now estimated at 20.3 million tonnes (mt), compared with initial estimates of 23.4 mt, the industry had opening stock of 7.75 mt. Consumption is expected to be lower due to the effect of demonetisation. Also, once crushing in the new season (beginning October) commences, supplies will improve. The government's intention is to ensure that speculation does not drive up prices once cane crushing ends in April. In the current season, lower output in Maharashtra and Karnataka and the southern states was the main reason for lower output. Uttar Pradesh mills' output is higher. However, the new sugar season (starting October) is expected to see higher cane output.

 $Read \quad more: \quad \underline{http://www.livemint.com/Money/yyHhSqKq2qJNgvCsXXxb4H/Government-intervention-a-potential-risk-for-sugar-new formula and the property of the$

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Governance & Development

HEALTH

Depression, an invisible burden for TB patients; and we must urgently address this (Karnika Bahuguna, *Down To Earth*, 7 April, 2017)

On the occasion of the World Health Day, the World Health Organization (WHO) released some alarming statistics on mental health. It said that depression is the leading cause of ill health and disability worldwide. Between 2005 and 2015, there has been an increase in the number of people affected by depression by more than 18 per cent. The situation becomes all the more grim when it is analysed in the context of tuberculosis. The prevalence of mental disorders, including depression and anxiety disorders, among people with tuberculosis is estimated to be between 40-70 per cent, the WHO says.

Read More: http://www.downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depression-an-invisible-burden-for-tb-patients-and-we-must-urgently-address-downtoearth.org.in/news/depress-downtoearth.org.in

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India and World

AMERICAS

The Supreme Court will Never be the Same

(The New Republic, April 7, 2017)

Senate Majority Leader Mitch McConnell has changed the Supreme Court for good. On Thursday, Democrats successfully filibustered President Donald Trump's nomination of Neil Gorsuch, the 49-year-old arch-conservative from the Tenth Circuit Court of Appeals in Denver, Colorado. Senate Republicans responded by changing the rules to require only a simple majority to confirm Supreme Court nominees, which was already the rule for all other federal judicial appointments. The immediate outcome was bad: Gorsuch was confirmed to a lifetime appointment to the Court on Friday. In the long term, the battle over Gorsuch reflects a new era in which Senate deference to judicial nominations is over, possibly with more sea changes to come.

Read more: https://newrepublic.com/article/141927/supreme-court-will-never

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Opinions/ Books

OPINIONS

Stirring up the nuclear pot

(T.P. Sreenivasan, The Hindu, April 10, 2017)

The theories of deterrence of nuclear stockpiles have also been discredited after 9/11 brought the most formidable nuclear power to its knees. Non-proliferation today, if any, is not on account of the Non-Proliferation Treaty (NPT), but on account of the futility of building nuclear arsenals. The threat of terrorism looms larger than the threat of nuclear weapons. After Fukushima, nuclear power too is receding as a sensible component of the energy mix. One clean-up operation after an accident can demolish many years of technological advancement and hopes of having cheap power. The sun shines as a source of energy, not the glittering nuclear reactors which seem to emit mushroom clouds.

Read More: http://www.thehindu.com/todays-paper/tp-opinion/stirring-up-the-nuclear-pot/article17899465.ece

Date Accessed: 10.04.2017

None for the road

(The Hindu, April 10, 2017)

The liquor trade, as the Supreme Court has emphasised, is indeed res extra commercium, something outside the idea of commerce. It exists solely at the discretion of policymakers without any concomitant fundamental right that other businesses enjoy. The point was cited by the court while ordering that liquor sales be prohibited within 500 metres from national and State highways. In a different sense, it only underscores how much the executive is, and ought to be, involved in policy-making on the subject. Imposing restrictions on the location of liquor outlets, applying them in a differential manner to vends, hotels and standalone bars is undoubtedly an executive decision. It is possible to argue that the executive will be lax in enforcement, corrupt in licensing or too revenue-centric to worry about the social costs of its decisions. However, is that reason enough for the judiciary to impose norms without regard to the problems that they may give rise to?

Read More: http://www.thehindu.com/todays-paper/tp-opinion/none-for-the-road/article17899445.ece

Date Accessed: 10.04.2017

India Need Not Worry About China's Bluster on Tawang and the Dalai Lama

(Kanwal Sibal, The Wire, 9 April, 2017)

China's policies in Tibet are reprehensible. The destruction of Tibetan patrimony during the Cultural Revolution was terrible. The suppression of the human rights of Tibetans, the demographic changes being wrought in Tibet through Han migration, the damage being done to the region's fragile ecology (China's record of environmental destruction on its own territory legitimises concerns about its activities in Tibet), the increasing militarisation of Tibet when no external threat to China's control of that territory exists, the water projects being built on the Brahmaputra disregarding lower riparian rights – all of this has a central bearing on not just the Tibetan question but India-China relations too.

If the visit to Arunachal Pradesh by Tibet's spiritual leader is enough reason for China to start a military conflict, then the worst fears about China's rise would have been proved true and it would pay a lasting price for its misadventure.

Read More: https://thewire.in/122468/122468/.

Date Accessed: 10.4.2017

Why RTE Implementation Needs Rethinking: Observations From Sonipat, Haryana (Shivkrit Rai & Deepanshu Mohan, *The Wire*, 7 April, 2017)

Those examining the implementation of social policies across Indian states continue to be amazed by the perpetual exacerbation of a hope vs reality conundrum. The state of primary education is a case in point here. From the government's perspective, when it comes to access to education, we usually witness a standard, patterned response on any investigative inquiry raising questions – it looks at the studies done, pick holes in the analysis conducted and deflects on issues concerning monitoring, outcome-based teaching and learning standards. While the Right to Education Act focuses on educational inputs – infrastructure, teachers, books – attention also needs to be paid to assessing learning outcomes.

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Opinions/ Books

Read More: https://thewire.in/121455/rte-implementation-sonipat-haryana/

Date Accessed: 10.04.2017

A Nation in Denial

(Economic and Political Weekly, 8 April, 2017)

We are a nation in denial, refusing to accept that despite being heterogeneous and diverse, we are intrinsically a casteist, racist and misogynist society. The dominant notion of "Indian-ness," that is increasingly also being identified with being Hindu, excludes all those who look, behave or think differently. Every time there are incidents that expose the reality of this Ugly India, we insist we are non-violent and tolerant because our society produced the likes of Gandhi and Buddha. No one is buying that argument anymore, least of all people from the African continent who have been targeted in ways that are unconscionable and a disgrace to any society that dares to call itself civilised.

What happened recently in Greater Noida is not new. It mirrors similar incidents in several Indian cities in the last few years. This time, the death of an Indian student through drug overdose was blamed on the Nigerians living in the neighbourhood and five of them were arrested. The matter did not end there. In the days that followed, random people from Africa, who come to India to work and study, were hounded, culminating in a mob of over 600 people beating and injuring several African nationals at a shopping mall.

Read More: http://www.epw.in/journal/2017/14/editorials/nation-denial.html.

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The Gig Economy's False Promise

(The New York Times, April 10, 2017)

The promises Silicon Valley makes about the gig economy can sound appealing. Its digital technology lets workers become entrepreneurs, we are told, freed from the drudgery of 9-to-5 jobs. Students, parents and others can make extra cash in their free time while pursuing their passions, maybe starting a thriving small business. In reality, there is no utopia at companies like Uber, Lyft, Instacart and Handy, whose workers are often manipulated into working long hours for low wages while continually chasing the next ride or task. These companies have discovered they can harness advances in software and behavioral sciences to oldfashioned worker exploitation, according to a growing body of evidence, because employees lack the basic protections of American law.

Read More: https://www.nytimes.com/2017/04/10/opinion/the-gig-economys-false-promise.html?ref=opinion& r=0

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