Mental health in India: Challenges ahead
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With the advent of latest technologies and rapid industrialization human beings have made advancement to a great extent, in the materialistic world. He has mechanized his instruments in such a sophisticated way so as to carry out complicated and heavy tasks in comparatively lesser time and utilizing lesser manpower. In this pursuit of progress, he became more and more ambitious which further led him to stressful life and to make compromises with his other aspects of life intentionally and sometimes unintentionally. One has to consider all the aspects of individual’s physical, mental, social and psychological angles which play an important role in maintaining the individual’s overall personality development as well as wellbeing so that he may lead a productive life. These factors along with the environmental and surroundings influences the behavior of individual. In the present day life though human beings may have progressed socially, economically and also intellectually but somewhere he tended to neglect his emotions, feelings, tolerance and above all there is a growing concern of loneliness amongst all age groups. There is an imbalance between the amount of stress a person takes up with the amount he can cope up with, which has led to increase in behavioral and mental health problems. Burden of mental disorders had risen over last few decades in general mental health is often equated with the cognitive and emotional wellbeing - it is all about the way one thinks, feels and behaves. Mental health, can also mean an absence of a mental disorder. Various factors which has led to the rise in mental health problems are - growing population, continuous stress, over exertion, high ambition, socioeconomic conditions, loneliness, drug abuse, expectations, competitions and failures etc. The list is unending.

It has been observed that there is a growing concern worldwide among developed as well as developing nations regarding the rise in behavioral and mental health disorders.

According to the World Health Organization, mental health is “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

WHO estimated that globally over 450 million people suffer from mental disorders. Currently mental and behavioral disorders account for about 12 percent of the global burden of diseases. This is likely to increase to 15 percent by 2020. Major proportions of mental disorders come from low and middle income countries. (1) In 2010, a study conducted in NIMHANS, Bangalore reported that the burden of mental and behavioral disorders ranged from 9.5 to 10.2 per 1000 population which is very low.
Mental health in children: The prevalence of mental disorders among 0-3 year old children was 13.8 percent, most commonly due to breath holding spells, pica, behavior disorder NOS, expressive language disorder and mental retardation. The prevalence rate in the 4-16 year old children was 12.0 percent mainly due to enuresis, specific phobia, hyperkinetic disorders, stuttering and oppositional defiant disorder.

Suicide among young people has emerged as a major public health issue. National crime record bureau, India reported, 27.7 percent increase in recorded number of suicides between 1995 and 2005 with suicide rate of 10.5 per million. In 2009, a study revealed that overall 3.9 percent youth reported suicidal behavior. The two most common reasons were alcohol dependence (16%) and adjustment disorders (15%).

Mental illnesses are mainly in form of:
- Psychoses
- Depression
- Socio-pathy
- Alcoholism & other substance use disorders
- Crime
- Delinquency
- Vandalism
- Conduct disorder
- Relational disorder

Causes of mental illness: Increasingly completely new categories of people are seeking help from mental health professionals and they cannot be classified under the DSM classification. These ‘everyday problems’ can range from academic difficulties, difficult peer interactions, relationship issues, career choices and unsatisfactory careers, family adjustment difficulties, marital discord, extra marital problems and dissatisfaction with one’s life. As a result, frustrations thrive and seem to touch everyone the distressed person meets. Such individuals who do not seem to be functioning to their potential are all around us.

Environmental factor: Impact of Urbanization: Due to urbanization, a lot of changes occur in every individual, family, society as well as the country as a whole. Some of the important impacts of urbanization are:
- Change of family dynamics
- Increased burden on female members

Work environment: Compared with the general population, industrial workers were more predisposed to mental disorders. Another study among industrial workers mentioned the lifetime prevalence of mental disorder to be more than 50 percent. Most common associated factor in industrial workers was substance abuse (12.3%).

School environment: stress of studies, Poor coping strategies, unfriendly environment

Demographic factors: Lifetime risk of affective disorders, panic disorders, generalized anxiety disorder, specific phobia and substance use disorders is found to be highest among illiterate and unemployed persons. Individuals with lower levels of education, low household income, lack of access to basic amenities are at high risk of mental disorder. Women in urban areas have significantly higher prevalence rates for neuroses, affective disorders, and organic psychoses than men. The rate of prevalence of mental disorders in women in urban India is estimated to be around 64.8 per 1000.

Challenges and way ahead in dealing with mental illness: The progress of ‘The National Mental Health Programme’ (NMHP) launched in India in 1982 is not satisfactory. This Programme trained the existing primary centre and the community centre staff to treat mental disorders within the community. Mental health services are part of general health services. But Prevention and promotion in the area of mental health is largely restricted to metropolitan cities. Concerns of privacy and widespread accepted treatment modes of the pill and injection may not allow individuals to choose psychotherapy as a treatment option available to them. Mental health trained personnel are limited and concentrated in urban areas. School mental health programme is launched in India but teachers are incapable of identifying the children with specific emotional needs. The teachers needs to
be trained in handling the class and children's unique problems like high-risk behaviours, sexuality, handling children who were passive and girl-boy relationship. They should be taught techniques to encourage children to share their fears and involve all the children in the activity. School mental health programme need to build emotional literacy, resilience, teach children skills to say no to drugs, smoking and alcohol, anti-bullying, promoting pro social behavior, mental health literacy, to teach coping skills and stress management.

Urbanization is a continuous process and cannot be stopped. With increasing stressors the protective mechanism like family support, peer groups, coping skills needs to be improved. Gender is important determinants and policy makers should be sensitive to this issue.

Mental health care has not received the attention it deserves in service, research and training aspects. Despite of all the efforts by government and private organizations the rise in mental health problem is still existent. We need to think about a holistic approach to take care of this issue. Lifestyle modifications, nutrition, yoga and meditation needs to be emphasized upon. The role of counseling services should not be forgotten. Moreover, as has been mentioned earlier family should also be made aware of the mental health and support from family requires to be an important part of management.

Above all there is an extensive gap in awareness in common public communities especially rural and uneducated masses. This gap needs to be bridged up through mass awareness programs as well as screening programs in schools, colleges and organizations or through camps.

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