

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

STARRED QUESTION NO:326
ANSWERED ON:16.12.2011
CASES OF DEPRESSION
Gandhi Smt. Maneka Sanjay

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the number of people suffering from depression and consumption of anti-depressant drugs have shown a disturbing trend in the country;
- (b) if so, the details of such cases reported during each of the last three years and the current year so far alongwith the reasons therefor, State/UT-wise;
- (c) the steps taken by the Government to curb the rising cases of depression in the country;
- (d) whether the Government proposes to launch mass awareness programme, particularly in the rural areas to educate the masses about depression and other forms of mental illness; and
- (e) if so, the details thereof?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

(a) to (e): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 326 FOR 16TH DECEMBER, 2011

(a) There are no long term population based studies in India to suggest that the number of cases of depression and consumption of antidepressant drugs are increasing in the country. However, as per a study conducted simultaneously at 11 centers in India, it was determined that the chance of an individual developing an episode of depression during the life time was 9% (life time prevalence). The study also revealed that the chance of developing an episode of major depression at any point of time in any 12 month period is 4.5% (period prevalence).

(b) Health being a State subject, the details of number of people suffering from depression, state-wise/UT wise are not centrally maintained in this Ministry. However, no single factor can be attributed for depression. Depression can be caused under a variety of circumstances such as genetic, biological, psychosocial and other stress related situations like marital stress, unemployment, profession related stress etc.

(c) To address the huge burden of mental disorders, the Government of India has introduced the National Mental Health Programme (NMHP) in the country since 1982. A total of 123 districts in 30 States/ UTs have been covered under the District Mental Health Program (DMHP) to provide detection, management and treatment of mental disorders/ illness. With the objective to address the shortage of mental health professionals in the country, 11 Centers of Excellence in Mental Health and 25 PG training departments in mental health specialties to increase the PG training capacity in mental health as well as improving the tertiary care treatment facility have been funded. Besides, three Central Institutions viz. National Institute of Mental Health And Neuro Sciences, Bangalore, Lokpriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur and Central Institute of Psychiatry, Ranchi, have been strengthened for augmenting the human resources in the area of mental health and for capacity building in the country. During the 11th Five Year Plan, the National Mental Health Programme has been restructured to include additional components like suicide prevention services, work place stress management, life skills training and counseling in schools and colleges. It also provides for upgradation of Psychiatry wings of Government Medical Colleges/ General Hospitals, modernization of State run Mental Hospitals, support for Central/ State Mental Health Authorities, Research and Training and Information, Education and Communication (IEC) activities.

National Mental Health Programme provides community based mental health services at district level for mental illnesses. It also provides for early detection, management and treatment of mental illness in the community through training of existing doctors at CHC/PHC level to provide mental health services and provision of basic drugs.

(d)&(e): The Information, Education and Communication activities are integral part of NMHP to generate awareness among the masses towards mental illness. Awareness messages in local newspapers and radio, street plays, wall paintings etc. the different IEC activities that are organized under DMHP.