

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

UNSTARRED QUESTION NO:1626

ANSWERED ON:16.08.2013

CASES OF DEPRESSION

Jeyadural Shri S. R.

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 along with 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 NABIAZAD)

(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 27 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 Govt. 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.

(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. are the different IEC activities that are organized under DMHP