NEXT IAS

DAILY EDITORIAL ANALYSIS

TOPIC

LOOKING BEYOND SUICIDE HELPLINES TO TACKLE MENTAL HEALTH ISSUES

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In Context

- India's mental health crisis cannot be solved by suicide helplines alone, as they only serve as emergency interventions while neglecting prevention, access, and systemic causes.

- A comprehensive approach that integrates healthcare, policy reform, community-based support, and stigma reduction is essential.

About

- A **state of mental well-being** where individuals can cope with normal life stressors, realize potential, work productively, and contribute to their community.

- India is home to nearly **one-sixth of humanity**, and also bears one of the largest mental health burdens.

- The **National Mental Health Survey (2015–16)** reported that almost **14% of the population** required active mental health interventions, a figure worsened by the pandemic's impact on anxiety, stress, and depression.

- Suicide helplines serve as an important support mechanism but represent **only the crisis-management** tip of a much deeper structural problem.

Current Situation in India

- **High Suicide Rates:** NCRB (2022) reported over 1.7 lakh suicides, the highest ever, with youth and women being highly vulnerable.

- **Treatment Gap:** Over 80% of those with mental health disorders remain untreated.

- **Shortage of Professionals:** Only 0.75 psychiatrists per 1 lakh people, far below WHO's recommended 3.

- **High Treatment Gap:** 83% remain untreated; 20% households pushed into poverty due to treatment costs.

- **Stigma & Awareness Issues:** Social taboos and misinformation delay care-seeking.

Why Suicide Helplines Alone Are Insufficient?

- **Reactive Layer:** Address crises only at critical stages, without long-term prevention.

- **Unequal Reach:** Predominantly urban-centric, limited for rural areas with poor digital infrastructure.

- **Quality Concerns:** Many rely on volunteers without formal training in psychiatric care.

- **Structural Blind Spots**: Underlying causes like unemployment, exam pressure, gender violence, and substance abuse remain unaddressed.

Addressing Root Causes

- **Economic:** Generate jobs, create safety nets.

- **Education:** Shift away from exam-heavy pressures, focus on life-skills.

- **Gender & Social Justice**: Combat domestic violence, discrimination, and addiction.

- **Awareness & De-stigmatisation:** Scale-up campaigns like Manodarpan to all sections of society.

- Encourage responsible **suicide reporting in media.**

Global Best Practices

- **UK:** IAPT (Improving Access to Psychological Therapies) programme offers free, evidence-based therapies via NHS.

- **Australia**: Youth-centered Headspace Centres integrate counselling, education, and job support.

- **WHO – mhGAP (Mental Health Gap Action Programme):** Focuses on integrating mental health services in general healthcare for low- and middle-income countries (LMICs).

Multi-Pronged Approach Needed

- **Strengthening Primary Mental Health Services:**
  - Integrate mental health into Ayushman Bharat Health & Wellness Centres (HWCs).
  - Train physicians and ASHA workers for basic counselling.
  - Expand the reach and efficiency of the District Mental Health Programme (DMHP).
- **Policy & Institutional Measures:**
  - Implement National Mental Health Policy (2014) and Mental Healthcare Act (2017) effectively.
  - Increase budget allocation for mental health (currently <1% of health budget).
  - Ensure wider insurance coverage for psychiatric care under PM-JAY and private plans.
- **Digital & Community-Based Care:**
  - Scale tele-psychiatry and AI-powered mental health apps.
  - AIIMS Delhi launched an AI-based mental health and wellness program called **"Never Alone".**
  - Expand the role of NGOs, faith-based institutions, and peer-support groups.
  - Promote counselling in schools and workplaces for early detection and support.

Conclusion

- While suicide helplines save lives during emergencies, they cannot resolve India's escalating mental health crisis on their own. Lasting progress requires systemic reforms, preventive care, and community-rooted support systems.
- Achieving **SDG 3.4—promoting mental health and reducing premature mortality** depends on India's ability to shift from reactive crisis models to holistic, preventive, and socially inclusive frameworks.

Source: TH

Daily Mains Practice Question

Q. Suicide helplines address immediate distress, but India's mental health crisis requires a deeper, systemic response. Discuss the challenges and suggest reforms for building a robust mental health ecosystem.

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