

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA  
UNSTARRED QUESTION NO. 1079  
TO BE ANSWERED ON 18<sup>TH</sup> SEPTEMBER, 2020**

**DEATHS DUE TO SUICIDE**

**1079. SHRI PARBATBHAI SAVABHAI PATEL:  
SHRI JASWANT SINGH BHABHOR:  
SHRI NARANBHAI KACHHADIYA:**

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

- (a) whether as per the recently conducted studies by the Government Agencies the number of cases of deaths due to suicides particularly among the youth is much higher in India;
- (b) if so, the details thereof, along with the State/UTs having higher rates of suicides, State/UT-wise;
- (c) the reasons for such hike in suicide rates; and
- (d) whether Government has taken or proposes to take any concrete steps to check such incidences, if so, the details thereof?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(SHRI ASHWINI KUMAR CHOUBEY)**

(a) & (b): As per the “Accidental Deaths and Suicides in India 2019” Report of the National Crime Records Bureau (NCRB), suicides in the age group of 18 years to below 30 years accounted for 35.06% of the total suicides, which is higher than the share of other age groups i.e. below 18 years (6.91%), 30 years to below 45 years (31.83%), 45 years to below 60 years (18.28%) and 60 years & above (7.92%). The details of five States/UTs having the highest rates of suicides (per 1 lakh population) are as under:

<b>S.No.</b>	<b>Name of the State</b>	<b>Rate of Suicides (per 1 lakh population)</b>
1.	Sikkim	33.1
2.	Chhattisgarh	26.4
3.	Kerala	24.3
4.	Telangana	20.6
5.	Tripura	18.2

(c) & (d): The causes of suicide have their origin in the social, economic, cultural, psychological and health status of an individual. The individual risk factors for suicide, inter-alia, include, previous suicide attempt, mental disorders, harmful use of alcohol, job or financial loss, hopelessness, chronic pain, family history of suicide and genetic and biological factors. To address the burden of mental disorders, the Government of India is implementing the National Mental Health Programme (NMHP) since 1982.

Under NMHP the Government is supporting implementation of the District Mental Health Programme (DMHP) in 692 districts of the country with the objectives to:

- (i) Provide mental health services including prevention, promotion and long-term continuing care at different levels upto district healthcare delivery system.
- (ii) Provide suicide prevention services, work place stress management, life skills training and counselling in schools and colleges.
- (iii) Augment institutional capacity in terms of infrastructure, equipment and human resource for mental healthcare.
- (iv) Promote community awareness and participation in the delivery of mental healthcare services.