

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

**LOK SABHA
UNSTARRED QUESTION NO. 900
TO BE ANSWERED ON 5TH FEBRUARY, 2021**

MENTAL HEALTH OF ELDERLY POPULATION

900. SHRI ACHYUTANANDA SAMANTA:

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

- (a) whether the Government is aware that a large percentage of the elderly population in India is suffering from probable major depression and deteriorating mental health symptoms according to the latest Longitudinal Ageing Study in India (LASI) Report;
- (b) if so, the details thereof;
- (c) whether the Government is considering taking steps to help the elderly population manage their mental health better, if so, the details thereof;
- (d) the details of the steps being taken by the Government to ensure there are more qualified professionals to address the rising mental health cases in the country; and
- (e) whether the Government is considering putting mental health related expenses under the ambit of medical insurance so as to ease the burden on the patients, if so, the details thereof and if not, the reasons therefor?

ANSWER

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

(a): As per the Longitudinal Ageing Study in India (LASI) report, a significant proportion of elderly population from India has probable major depression.

(b): in the LASI, the Centre for Epidemiological Studies Depression (CES-D) scale was used to identify the presence of depressive symptoms; and the Composite International Diagnostic Interview-Short Form (CIDI-SF) scale, a structured interview scale, was used for diagnosing probable major depression. The overall proportion of older adults in India age 45 and older who screened positive for depressive symptoms based on the CES-D scale is 28%; 30% of the elderly age 60 and above have depressive symptoms, compared to 26% of older adults age 45-59.

The prevalence of probable major depression (based on CIDI-SF) among older adults age 45 and above in India is 8%. The prevalence of probable major depression among the elderly age 60 and above (8.3%) is ten times higher than the self-reported prevalence of diagnosed depression (0.8%), suggesting a markedly higher burden of undiagnosed depression. The

comparison of CES-D and CIDI-SF outcomes suggest that in India, close to a third of elderly age 60 and above have had depressive symptoms, whereas one in every twelve elderly age 60 and above have had probable major depression.

Among the elderly age 60 and above, the prevalence of probable major depression is higher among women (9%) than men (7%), and those in rural (9%) than those in urban areas (6%), among the widowed (10%), those living alone (13%), Scheduled caste (10%), and those who worked in the past but are not currently working (10%).

(c): To address the burden of mental disorders, the Government of India is implementing the National Mental Health Programme (NMHP). The Government is supporting implementation of the District Mental Health Programme (DMHP) under NMHP in 692 districts of the country with the objectives to:

- (i) Provide suicide prevention services, work place stress management, life skills training and counselling in schools and colleges.
- (ii) Provide mental health services including prevention, promotion and long-term continuing care at different levels of district healthcare delivery system.
- (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.

(d): With a view to augment the availability of qualified manpower in field of mental health, the Government, under the National Mental Health Programme (NMHP), is implementing manpower development schemes for establishment of Centres of Excellence and strengthening/ establishment of Post Graduate (PG) Departments in mental health specialties. Till date, support has been provided for establishment of 25 Centres of Excellence and strengthening/ establishment of 47 Post Graduate (PG) Departments in four mental health specialties viz. (i) Psychiatry, (ii) Clinical Psychology, (iii) Psychiatric Nursing, and (iv) Psychiatric Social Work, in the country.

The Government is also augmenting the availability of manpower to deliver mental healthcare services in the underserved areas of the country by providing online training courses to various categories of general healthcare medical and para medical professionals through the Digital Academies established at the three Central Mental Health Institutes namely National Institute of Mental Health and Neuro Sciences, Bengaluru, Lokopriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur, Assam, and Central Institute of Psychiatry, Ranchi.

(e): As per Section 21 (4) of the Mental Healthcare Act, 2017, every insurer shall make provision for medical insurance for treatment of mental illness on the same basis as is available for treatment of physical illness. The Insurance Regulatory and Development Authority of India vide order dated 16th August, 2018 has directed all insurance companies to comply with the aforesaid provision of the Mental Healthcare Act, 2017.