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India's Mental Health Crisis, The Cries and Scars

Context

- In recent years, **India has witnessed an alarming rise in suicides and mental health distress** that cuts across class, gender, geography, and age.
- From the **tragic deaths of a young couple in Shahjahanpur, Uttar Pradesh, to the recurring suicides of students in Kota, Rajasthan**, these events are not isolated incidents but symptoms of a deeper, systemic crisis.
- Despite rapid economic and technological progress, **India's collective psyche is in turmoil, burdened by social pressure, economic uncertainty**, and institutional neglect.

The Data Behind the Despair

- According to the **National Crime Records Bureau's Accidental Deaths and Suicides in India (ADSI) 2023** report, India recorded **1,71,418 suicides**, the highest number globally.
- **While the overall rate per 1,00,000 people decreased slightly** due to population growth, the absolute figures reveal a consistent and pervasive crisis.
- **Men constitute nearly 73%** of victims, pointing to gendered burdens rooted in financial stress, familial expectations, and social stigma.
- **States such as Maharashtra, Tamil Nadu, and Karnataka account for the majority of suicides**, while cities continue to report higher rates than rural regions, reflecting the psychological strain of urban life.
- The **agrarian sector remains in distress, with over 10,000 farmers** taking their lives in 2023 alone.
- **Between 1995 and 2015, nearly 3 lakh farmers died by suicide**, casualties of debt, crop failure, and institutional neglect.

The Human Face of Loneliness and the Turn to Technology

- Amidst this crisis, an unsettling phenomenon has emerged: individuals increasingly turn to **artificial intelligence** for emotional support.
- Studies capture a poignant moment, **someone overwhelmed by existential fatigue finding comfort not in human company but in an AI chatbot**. This shift is deeply symbolic.
- It **reflects not a triumph of technology but the collapse of human connection** and institutional care.
- **AI platforms such as ChatGPT are becoming surrogate confidants for millions of Indians**, a trend acknowledged even by OpenAI's leadership.

- Yet, **these digital tools lack confidentiality, empathy,** and professional safeguards.

Systemic Failures: Gaps in Policy and Infrastructure

- India's mental health **infrastructure is woefully inadequate.**
- With **only 0.75 psychiatrists per 1,00,000 people**, the country falls far below the WHO's minimum benchmark.
- The treatment gap, ranging from **70% to 92%**, leaves millions without access to care. While the **Mental Healthcare Act (2017)** and the **National Suicide Prevention Strategy (2022)** appear progressive on paper, their implementation has been sluggish and ineffective.
- **Government initiatives such as Manodarpan**, designed to provide psychosocial support to students, **remain largely inactive.**
- Even the modest **₹270-crore mental health budget** is underutilized, revealing bureaucratic apathy.
- **Educational institutions, coaching centres**, and workplaces offer token counselling services, **often handled by untrained staff.**
- Consequently, **India's suicide prevention and mental health programs remain fragmented,** underfunded, and detached from the realities of everyday distress.

Towards a Compassionate Framework: What Must Be Done

• Cross-Ministerial Task Force

- If India is to avert a full-blown mental health catastrophe, it must treat mental well-being as a **national emergency** rather than a peripheral concern.
- The government should establish a **cross-ministerial task force** integrating health, education, agriculture, and social welfare to coordinate policy and funding.
- The **goal should be to achieve three to five mental health professionals per 1,00,000 people** within five years through expanded training programs, scholarships, and incentives for rural service.

• Counselling as Part of Public Infrastructure

- **Counselling must become part of public infrastructure**, as essential as hospitals or schools, with full-time, trained professionals in every district, college, and farming block.
- **Public campaigns should challenge stigma, normalise therapy**, and share stories of recovery. Moreover, specific interventions are required for **high-risk groups** such as farmers, homemakers, and students.

• Targeted Approach for Different Groups

- For farmers, mental health support must coincide with **debt relief and livelihood reforms**. For homemakers, **community-based therapy networks** can break isolation.
- In coaching hubs like Kota, mental health care must be proactive, preventive, and institutionalised.

- **Regulation of Digital Mental Health Programs**

- Simultaneously, the government must **regulate digital mental health platforms**.
- **Emotional-support apps and AI tools should disclose privacy risks**, embed emergency response links, and ensure connection to licensed professionals.
- Until ethical and legal safeguards are in place, **AI should complement, not replace, human care**.

Conclusion

- The **mental health crisis in India is not merely a health statistic**; it is a reflection of societal failure.
- Suicide remains the **leading cause of death among youth aged 15-29**, and India accounts for a disproportionate share of global female suicides.
- **Beyond the loss of human life lies an economic cost**, projected to exceed **\$1 trillion by 2030** in lost productivity.
- **Policies, budgets, and technology must converge to send one simple but powerful message** to every struggling citizen: **You matter**.

India's Mental Health Crisis, The Cries and Scars FAQs

Q1. What central issue does the suicide rate highlight?

Ans. Studies reflect India's growing mental health crisis, reflected in rising suicide rates and widespread emotional distress across different sections of society.

Q2. Why are more people turning to AI platforms for emotional support?

Ans. Many people turn to AI platforms because they find them less judgmental and more accessible than human company, revealing a deep sense of loneliness and mistrust in human support systems.

Q3. What are the major shortcomings in India's mental health system?

Ans. India faces a severe shortage of trained professionals, underfunded programs, and poorly implemented policies, leaving millions without access to adequate care.

Q4. What are some recommendations improving mental health care in India?

Ans. Treating mental health as an emergency, increasing trained personnel, integrating counselling into public institutions, and regulating digital mental health platforms.

Q5. What must be done to prevent rising rate of suicides?

Ans. India must act with compassion and urgency to show every struggling person that their life matters.

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