A blog on Indian experience of COVID-19, economic consequences and related mental health issues

In this blog, IFoA members, Raunak Jha and Scott Reid, consider Indian experience of COVID-19, economic consequences and related mental health issues as part of the IFoA's Covid-19 Action Taskforce

"Every person with mental illness shall be treated as equal to persons with physical illness in the provisions of all health care." (source: Mental Health Care Act (MCHA), 2017)

Background

This bulletin will focus on India, a developing country, where we will consider the economic consequences of COVID-19 on employment and subsequent mental health outcomes.

Because of government interventions during the COVID-19 pandemic, India has suffered high rates of unemployment which has increased further the high prevalence of mental health disorders.

Current state of mental health in India

WHO has estimated that the burden of mental health problems in India is 2,443 Disability Adjusted Life Years per 100,000 population, and the age-adjusted suicide rate per 100,000 population is 21.1 [1]. In contrast, the UK suicide rate in England is 12.8 per 100,000 of population [2].

In 2017, around 197·3 million people had mental disorders in India, including 45·7 million with depressive disorders and 44·9 million with anxiety disorders [3]. Many epidemiological surveys carried out in India on mental disorders have demonstrated the prevalence of mental morbidity in rural and urban areas of the country; these rates are comparable to global rates.

India globally has the 3rd highest number of COVID-19 cases behind the US and Brazil [4]. The case count has come down significantly due to precautionary measures adopted by the Indian Government but the uncertainty around 2nd and 3rd wave is expected to impact the unlocking initiatives taken to bring the economic state back normal.

With over twelve months into the Covid-19 pandemic, fears, worries and uncertainty about health, financial matters and job losses have exacerbated mental health issues. The isolation during the countrywide lockdown to contain the Covid-19 pandemic just made matters worse for many. The number of first timers seeking professional help for their mental health problems during the Covid-19 pandemic is rising exponentially, which is evident in online doctor consultation platforms that have witnessed a significant rise in patient consultations around mental health conditions [5].

Impact of lockdown measures on unemployment

India experienced a rapid increase in unemployment during their first lockdown peaking in April and May 2020 but is now back to about the same level pre-COVID (Figure 1). In contrast, the UK didn't suffer the same impact on unemployment due to government intervention through supporting employees and companies but at the cost of a much high-level national debt [6]. These different government strategies will have different consequences for population mental health caused by financial stress [7].

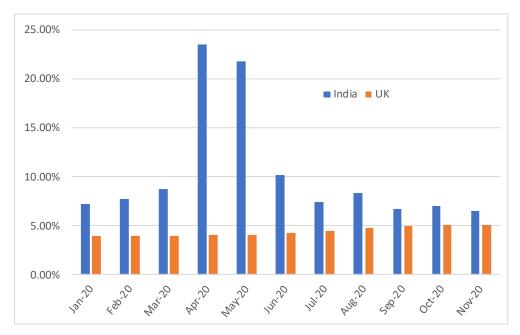


Figure 1: India and UK unemployment rates by month during 2020:

Source: [8] [9]

The more devastating impact of the virus and the range of lockdown measures impacted those segments in Indian society that were at an economic disadvantage, with limited access to proper healthcare and other resources. The Government launched multiple support schemes to manage unemployment, food requirements and cash support needed by under privileged sections of society to manage immediate negative impact of Covid-19 restrictions. For example, under the welfare scheme "Pradhan Mantri Garib Kalyan Yojana", 312 billion Indian rupees (USD 4.3bn) were accrued and provided to around 331 million beneficiaries that included women, construction workers, farmers, and senior citizens.

What this could mean in terms of increasing demand on mental health

Mental health workforce in India per 100,000 population include: psychiatrists (0.3), nurses (0.12), psychologists (0.07) and social workers (0.07) [10]. To put this in context, the average national deficit of psychiatrists was estimated to be 77% according to the World Mental Health Atlas (2014) [11].

Availability of resources is a challenge and slowly the gap is being filled with the increasing supply of private counselling. According to The Lancet Psychiatry December 20, 2019 [3], about 197.3 million people require mental health services (about 14-15% of total population). Mental disorders are not only highly prevalent with disabling medical conditions but also have a significant treatment gap.

Comparing the number of people suffering from mental disorders to the mental health resources illustrates the magnitude of the problem and inadequacy of resources (Table 1). This clearly calls for urgent attention to narrow this wide gap in terms of need of mental healthcare and limited supply available to deal with requirements.

Variable	Numbers
Population of India	1350 Million
Number of people suffering from mental disorders	197.3 Million
Number of people suffering from severe mental	
disorders (current)	11.1 Million
Number of beds for patients with psychiatric disorders	
(approximately)	23000
Number of psychiatrists	9000
Number of psychiatrist nurses(mental health nurses)	2000
Number of psychiatric social workers	1000
Number of clinical psychologists	1000
Sources: [12] [3] [10]	

Table 1: Demand	for mental healt	h services	compared to	existing resources
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Given the government focus to manage the existing COVID-19 crisis, the implementation of the Mental Health Care Act (MHCA) 2017 has been delayed. The MHCA 2017 received Presidential assent on 7th April, 2017 to provide for mental healthcare and services for persons with mental illness in India and to protect, promote and fulfil the rights of such persons during delivery of mental healthcare services. This act was enacted keeping in mind the need to align and harmonize with UNCRPD (United Nations Convention of Person with Disabilities) which India signed on 1st April, 2007. The existing emergency is predicted to exacerbate the existing mental health gap further.

Conclusion

Like other countries in the world, India suffered a severe economic impact due to government interventions to flatten the Covid-19 curve that resulted in causing high unemployment and a rapid increase in mental illness conditions. The limited financial support provided has exacerbated the situation. The number of reported cases of mental illness in India has risen by 20% during the pandemic and unreported cases are expected to be material.

With the continuing focus of managing the Covid-19 situation and its economic impacts, managing the emerging mental health crisis is likely to become a top priority for the Central Government in 2021.

Bibliography

- [1] WHO, "Mental health," https://www.who.int/india/health-topics/mental-health, accessed online 12/3/2021.
- [2] "Mental health statistics: suicide," Mental Health Foundation, https://www.mentalhealth.org.uk/statistics/mental-health-statistics-suicide.
- [3] "The burden of mental disorders across the states of India: the Global Burden of Disease Study 1990–2017," The Lancet, https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(19)30475-4/fulltext#tables.
- [4] "COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)," Johns Hopkins University & Medicine, Coronavirus Resiource Centre, https://coronavirus.jhu.edu/map.html, online 13/3/2021.
- [5] T. T. o. India, "Online health platforms see spike in mental health queries amidst Covid-19 pandemic," TOI, https://timesofindia.indiatimes.com/home/sunday-times/online-health-platforms-see-spike-in-mental-health-queries-amidst-covid-19-pandemic/articleshow/76630185.cms.
- S. R. e. al, "COVID-19 and pandemic response unemployment Model," IFoA, https://www.actuaries.org.uk/system/files/field/document/Covid19_UE%20Model%20Final
 .pdf.
- [7] N. O. e. al, "Economic hardship, health and COVID-19," IFoA, https://www.actuaries.org.uk/system/files/field/document/Covid19_EconomicStressHealth %20v1.2_clean.pdf, Oct 2020.
- [8] "Unemployment Rate in India," CMIE, https://unemploymentinindia.cmie.com/kommon/bin/sr.php?kall=wshowtab&tabno=0001, accessed online 13/3/2021.
- [9] "Employment in the UK: February 2021," ONS, https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandem ployeetypes/bulletins/employmentintheuk/february2021#:~:text=The%20UK%20unemploy ment%20rate%20was,higher%20than%20the%20previous%20quarter..
- [10] "National Mental Health Survey of India, 2015-16," NMHS, http://indianmhs.nimhans.ac.in/Docs/Report1.pdf, 2016.
- [11] "Mental Health Atlas 2014," WHO, https://www.who.int/mental_health/evidence/atlas/mental_health_atlas_2014/en/.
- [12] "Number of psychiatrists in India: Baby steps forward, but a long way to go," Indian Journal of Psychiatry, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6341936/.