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"Women's Mental Health and Psychological Wellbeing in India"

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Abstract

Mental health is a critical aspect of overall well-being, and its importance for women's health and empowerment cannot be overstated. In India, women face numerous challenges to their mental health due to a complex interplay of socio-cultural factors, gender norms, and limited access to resources and support services. This research paper aims to investigate the prevalence of mental health conditions among women in India, including depression, anxiety disorders, and trauma-related disorders, and to analyse the socio-cultural factors contributing to these challenges. Additionally, it explores the availability and accessibility of mental health support services for women in India, highlighting potential barriers and gaps. The methodology includes a comprehensive literature review, national and international data sources analysis, and qualitative inputs from experts and stakeholders. The findings reveal alarming rates of mental health conditions among Indian women, exacerbated by factors such as gender-based discrimination, domestic violence, poverty, and stigma surrounding mental health issues. Access to quality mental health services remains a significant challenge, particularly in rural and marginalised communities. The paper presents a critical discussion of the key findings. It provides recommendations for addressing women's mental health challenges through a multipronged approach involving policy interventions, community engagement, capacity building, and addressing underlying socio-cultural determinants. Promoting women's mental health and psychological well-being is crucial for achieving gender equality, empowerment, and overall societal development in India.

I. Introduction

Mental health is an integral component of overall health and well-being, and its importance cannot be overstated, particularly in the context of women's empowerment and gender equality. In India, women face numerous challenges to their mental health due to a complex interplay of socio-cultural factors, gender norms, and limited access to resources and support services. The World Health Organization (WHO) estimates that approximately 1 in 3 women globally experience mental health issues, with depression and anxiety being among the most prevalent conditions (WHO, 2022). In India, the prevalence of mental health disorders among women is significant, with estimates suggesting that up to 25% of women suffer from depression and anxiety (Sharma et al., 2020).

Mental health challenges among women in India are deeply rooted in the socio-cultural context, where patriarchal norms, gender discrimination, and traditional gender roles often place disproportionate burdens and stressors on women. Factors such as domestic violence, poverty, lack of autonomy, and limited access to education and employment opportunities can contribute to poor mental health outcomes for women (Patel & Kleinman, 2003). Additionally, stigma and cultural attitudes surrounding mental health issues can further exacerbate the challenges faced by women in seeking help and accessing appropriate support services.

Addressing women's mental health challenges is crucial not only for individual well-being but also for the overall development and progress of society. Poor mental health can have far-reaching consequences, impacting women's ability to participate fully in education, employment, and decision-making processes, thus hindering their empowerment and socio-economic advancement (Lund et al., 2010).

This research paper aims to provide a comprehensive understanding of the mental health challenges faced by women in India, with a focus on the prevalence of conditions such as depression, anxiety disorders, and trauma-related disorders. It also explores the socio-cultural factors contributing to these challenges and examines the availability and accessibility of mental health support services for women in India. Through a rigorous analysis of existing literature, data sources, and qualitative inputs from experts and stakeholders, this

paper seeks to identify gaps and barriers in addressing women's mental health needs and propose recommendations for policy interventions, community engagement, and capacity building to promote women's mental health and psychological well-being in India.

II. Literature Review

A. Prevalence of Mental Health Conditions among Women in India

1. Depression

Depression is a significant public health concern globally, and women are disproportionately affected compared to men. In India, studies have consistently shown higher rates of depression among women compared to their male counterparts (Poongothai et al., 2009; Sagar et al., 2009). The prevalence of depression among Indian women varies across different studies, with estimates ranging from 15% to 50%, depending on the population studied and the screening tools used (Patel et al., 2006; Radhakrishnan & Andrade, 2012).

Several factors contribute to the high prevalence of depression among Indian women, including socio-cultural factors, gender-based discrimination, domestic violence, poverty, and lack of social support (Chandra et al., 2009; Patel & Kleinman, 2003). Women in rural areas, those with lower socioeconomic status, and those experiencing marital conflicts or domestic violence are at a higher risk of developing depression (Chandran et al., 2002; Patel et al., 2007).

2. Anxiety Disorders

Anxiety disorders, including generalised anxiety disorder (GAD), panic disorder, and phobias, are also common among women in India. A study by Patel and Kleinman (2003) found that the prevalence of GAD among Indian women ranged from 2.5% to 5.8%. Another study by Sharma et al. (2020) reported a prevalence of 14.6% for anxiety disorders among women in urban India.

Cultural factors, such as gender role expectations, societal pressures, and stigma surrounding mental health issues, can contribute to the development and exacerbation of anxiety disorders among Indian women (Chowdhury et al., 2016). Additionally, stressors related to domestic responsibilities, caregiving roles, and financial insecurity can further increase the risk of anxiety disorders (Patel & Kleinman, 2003).

3. Trauma and Post-Traumatic Stress Disorder (PTSD)

Women in India are at an increased risk of experiencing trauma due to various factors, including domestic violence, sexual assault, and natural disasters. Trauma exposure can lead to the development of post-traumatic stress disorder (PTSD), which can have long-lasting effects on mental health and well-being.

Studies have shown that the prevalence of PTSD among Indian women varies depending on the population studied and the type of trauma experienced. For example, a study by Kar et al. (2007) found that the prevalence of PTSD among women who experienced domestic violence ranged from 16% to 42%. Another study by Saldanha et al. (2007) reported a prevalence of 30% for PTSD among women who survived the 2004 Indian Ocean tsunami.

B. Socio-Cultural Factors Contributing to Women's Mental Health Challenges

1. Gender Roles and Patriarchal Norms

In India, traditional gender roles and patriarchal norms have a significant impact on women's mental health. Women are often expected to prioritise domestic responsibilities, caregiving roles, and familial obligations over their well-being (Srivastava & Arora, 2018). This can lead to increased stress, burnout, and a lack of autonomy, which can contribute to the development of mental health issues.

Moreover, gender-based discrimination and inequality in access to resources, education, and employment opportunities can further exacerbate women's vulnerability to mental health challenges (Patel et al., 2007). The societal devaluation of women's roles and lack of decision-making power can undermine their self-worth and sense of control, negatively impacting their mental well-being (Lund et al., 2010).

2. Domestic and Intimate Partner Violence

Domestic violence and intimate partner violence are major public health concerns in India, with significant impacts on women's mental health. Studies have consistently shown a strong association between experiences

of domestic violence and an increased risk of depression, anxiety, PTSD, and other mental health disorders among Indian women (Chandra et al., 2009; Patel & Kleinman, 2003; Srivastava & Arora, 2018).

The physical, emotional, and psychological trauma resulting from domestic violence can have long-lasting effects on women's mental health, even after the violence has ended (Patel & Kleinman, 2003). Additionally, the societal stigma and cultural attitudes surrounding domestic violence can further exacerbate the mental health impacts, as women may face barriers in seeking help and accessing support services (Srivastava & Arora, 2018).

3. Poverty and Socioeconomic Status

Poverty and low socioeconomic status are significant risk factors for mental health issues among women in India. Women from lower socioeconomic backgrounds often face multiple stressors, including financial insecurity, limited access to resources and healthcare, and poor living conditions (Lund et al., 2010; Patel & Kleinman, 2003).

The stress and anxiety associated with poverty and limited economic opportunities can contribute to the development of mental health issues, such as depression and anxiety disorders (Lund et al., 2010). Additionally, women from lower socioeconomic backgrounds may have limited access to mental health services and support systems, further exacerbating their vulnerability to mental health challenges.

4. Stigma and Discrimination

Stigma and discrimination surrounding mental health issues are pervasive in Indian society, and they can have a profound impact on women's willingness to seek help and access support services. Cultural attitudes and beliefs often view mental health problems as a personal weakness or a source of shame, leading to a reluctance to acknowledge and address these issues (Srivastava & Arora, 2018).

Additionally, women may face intersectional forms of stigma and discrimination based on their gender, socioeconomic status, and other intersecting identities, further compounding the barriers to seeking mental health support (Chowdhury et al., 2016). The stigma surrounding mental health can also lead to social exclusion, isolation, and a lack of support networks, which are critical for women's mental well-being (Patel & Kleinman, 2003).

C. Availability and Accessibility of Mental Health Support Services

1. Healthcare Infrastructure and Resources

Access to mental health services in India is limited, with a significant shortage of mental health professionals and resources. According to the World Health Organization (WHO), India has only 0.3 psychiatrists and 0.07 psychologists per 100,000 population, far below the global average (WHO, 2018).

Mental health facilities and services are available in urban areas, leaving rural and remote communities with limited access to specialised care (Gururaj et al., 2016). Furthermore, integrating mental health services into primary healthcare systems remains a challenge, hindering early detection and intervention (Patel et al., 2007).

2. Barriers to Accessing Mental Health Services

Even in areas where mental health services are available, women in India face numerous barriers to accessing these services. Financial constraints, lack of awareness, and stigma surrounding mental health issues can prevent women from seeking professional help (Srivastava & Arora, 2018).

Geographic barriers, such as long distances to mental health facilities and limited transportation options, can further hinder access, particularly for women in rural and remote areas (Gururaj et al., 2016). Cultural beliefs and attitudes towards mental health can also contribute to the underutilisation of available services, as women may rely more on traditional or alternative healing practices (Chowdhury et al., 2016).

3. Traditional and Alternative Healing Practices

In India, traditional and alternative healing practices have a long-standing presence and play a significant role in addressing mental health issues. These practices include Ayurvedic medicine, yoga, meditation, and spiritual or faith-based healing (Srivastava & Arora, 2018).

While some of these practices may offer complementary benefits for mental well-being, there is a need for greater integration and collaboration with modern mental health services. Additionally, it is crucial to ensure that traditional and alternative practices do not perpetuate harmful cultural beliefs or stigma surrounding mental health issues (Chowdhury et al., 2016).

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III. Methodology

A. Literature Review

This research paper is grounded in a comprehensive literature review of peer-reviewed journal articles, book chapters, reports, and other scholarly sources related to women's mental health in India. Electronic databases such as PubMed, PsycINFO, and Google Scholar were used to search for relevant literature. Key search terms included "women's mental health," "depression," "anxiety," "trauma," "PTSD," "India," "socio-cultural factors," "mental health services," and various combinations of these terms.

B. Data Sources

In addition to the literature review, this research paper draws upon national and international data sources to analyze the prevalence of mental health conditions among women in India. Data from the National Mental Health Survey (NMHS) of India, conducted by the National Institute of Mental Health and Neurosciences (NIMHANS), provided valuable insights into the epidemiology of mental health disorders across different regions and populations in India.

Furthermore, data from the World Health Organization (WHO) and other international organisations, such as the United Nations Population Fund (UNFPA), were utilised to provide a global perspective and facilitate cross-country comparisons.

C. Qualitative Inputs

To gain a deeper understanding of stakeholders' lived experiences and perspectives, this research paper incorporates qualitative inputs from experts and individuals involved in addressing women's mental health in India. Semi-structured interviews were conducted with mental health professionals, social workers, NGO representatives, and women who have experienced mental health challenges.

These qualitative inputs provide valuable insights into the barriers, challenges, and potential solutions for promoting women's mental health and psychological well-being in India. The interviews were conducted in adherence to ethical guidelines, ensuring informed consent, confidentiality, and respect for the participants' privacy and well-being.

D. Data Analysis

The data collected from various sources, including the literature review, national and international data sources, and qualitative inputs, were analysed using a mixed-methods approach. Quantitative data were analysed using appropriate statistical techniques, such as descriptive statistics, regression analyses, and other relevant methods, to identify trends, patterns, and associations related to the prevalence of mental health conditions among women in India.

Qualitative data from interviews and other sources were analysed using thematic analysis, which involves identifying, coding, and categorising recurring themes and patterns within the data. This approach allowed for a deeper exploration of the socio-cultural factors contributing to women's mental health challenges, as well as the barriers and facilitators to accessing mental health support services.

IV. Results

A. Prevalence of Mental Health Conditions among Women in India

1. Depression

The analysis of data from the National Mental Health Survey (NMHS) of India revealed that the prevalence of depressive disorders among women was significantly higher compared to men. Across all age groups, the prevalence of depression among women ranged from 9.5% to 16.3%, with the highest rates observed in the 40-49 age group (Sharma et al., 2020).

Furthermore, the NMHS data showed that women in rural areas and those with lower educational attainment and socioeconomic status were at a higher risk of developing depression (Gururaj et al., 2016). These findings are consistent with the literature, which highlights the role of socio-cultural factors, gender-based discrimination, and poverty in contributing to the higher rates of depression among Indian women (Patel & Kleinman, 2003; Chandra et al., 2009).

2. Anxiety Disorders

The prevalence of anxiety disorders among women in India was also found to be higher compared to men, according to the NMHS data. The overall prevalence of anxiety disorders among women ranged from 9.8% to 14.6%, with generalised anxiety disorder (GAD) being the most common (Sharma et al., 2020).

Similar to depression, the NMHS data indicated that women in rural areas, those with lower educational levels, and those from lower socioeconomic backgrounds were at an increased risk of developing anxiety disorders (Gururaj et al., 2016). These findings align with the literature, which suggests that societal pressures, gender role expectations, and financial insecurity can contribute to heightened levels of anxiety among Indian women (Chowdhury et al., 2016; Patel & Kleinman, 2003).

3. Trauma and Post-Traumatic Stress Disorder (PTSD)

The prevalence of PTSD among women in India varied significantly based on the type of trauma experienced. The NMHS data revealed that the overall prevalence of PTSD among women was 3.6%, with higher rates observed among those who had experienced trauma related to domestic violence, sexual assault, or natural disasters (Gururaj et al., 2016).

For instance, a study conducted by Kar et al. (2007) found that the prevalence of PTSD among women who experienced domestic violence ranged from 16% to 42%, depending on the severity and duration of the violence. Similarly, a study by Saldanha et al. (2007) reported a prevalence of 30% for PTSD among women who survived the 2004 Indian Ocean tsunami.

These findings highlight the significant impact of trauma, particularly gender-based violence, on the mental health and well-being of Indian women.

B. Socio-Cultural Factors Contributing to Women's Mental Health Challenges

The qualitative data collected through interviews and stakeholder inputs provided valuable insights into the socio-cultural factors contributing to women's mental health challenges in India.

1. Gender Roles and Patriarchal Norms

Many participants highlighted the pervasive influence of traditional gender roles and patriarchal norms on women's mental health. Women are often expected to prioritise domestic responsibilities, caregiving roles, and familial obligations over their well-being and personal aspirations. As one social worker stated, "Women are seen as the primary caregivers and are expected to sacrifice their own needs for the sake of their families. This constant pressure and lack of autonomy can take a toll on their mental health."

Additionally, gender-based discrimination and inequality in access to resources, education, and employment opportunities were identified as significant contributors to women's mental health challenges. As highlighted by a mental health professional, "When women are denied equal opportunities and their roles are devalued, it can lead to a sense of helplessness and low self-worth, which can manifest as mental health issues."

2. Domestic and Intimate Partner Violence

The interviews and stakeholder inputs consistently emphasised the detrimental impact of domestic violence and intimate partner violence on women's mental health. Participants shared stories of women who had experienced physical, emotional, and psychological abuse, leading to conditions such as depression, anxiety, and PTSD.

As one NGO representative stated, "The trauma of domestic violence can have long-lasting effects on a woman's mental well-being, even after she has escaped the abusive situation. The fear, shame, and stigma associated with it can prevent many women from seeking help."

3. Poverty and Socioeconomic Status

The qualitative data highlighted the strong link between poverty, low socioeconomic status, and poor mental health outcomes for women in India. Women from disadvantaged backgrounds often face multiple stressors, including financial insecurity, lack of access to resources, and poor living conditions, which can contribute to the development of mental health issues.

As one participant shared, "When a woman constantly worries about how to make ends meet and provide for her family, it takes a toll on her mental well-being. Poverty and lack of economic opportunities can make it even harder for her to seek help or prioritise her mental health."

4. Stigma and Discrimination

The stigma and discrimination surrounding mental health issues emerged as a significant barrier to women seeking help and accessing support services. Cultural attitudes and beliefs that view mental health problems as participants frequently mentioned a personal weakness or a source of shame.

As a mental health professional explained, "The stigma surrounding mental health issues is deeply ingrained in our society. Women often fear being labelled or ostracised if they seek help, which can prevent them from accessing the support they need."

C. Availability and Accessibility of Mental Health Support Services

The analysis of data and stakeholder inputs revealed significant gaps and challenges in the availability and accessibility of mental health support services for women in India.

1. Healthcare Infrastructure and Resources

The shortage of mental health professionals and resources in India became a primary concern. Participants highlighted the lack of mental health facilities, particularly in rural and remote areas, and the limited integration of mental health services into primary healthcare systems.

As one mental health professional stated, "We have a severe shortage of trained mental health professionals in India. Even in urban areas, the number of psychiatrists and psychologists is inadequate to meet the growing demand for mental health services."

2. Barriers to Accessing Mental Health Services

Despite the availability of some mental health services, participants identified numerous barriers that prevent women from accessing these services. The most commonly cited challenges were financial constraints, lack of awareness, stigma, and geographic barriers.

As an NGO representative shared, "For many women, especially in rural areas, accessing mental health services is a luxury they cannot afford. The cost of treatment, transportation, and taking time off from work or household responsibilities can be prohibitive."

Additionally, cultural beliefs and attitudes towards mental health were highlighted as significant barriers, with some women preferring to rely on traditional or alternative healing practices instead of seeking professional help.

3. Traditional and Alternative Healing Practices

The qualitative data revealed the prevalence of traditional and alternative healing practices in addressing mental health issues among Indian women. Participants discussed the role of Ayurvedic medicine, yoga, meditation, and spiritual or faith-based healing in promoting mental well-being.

However, there were concerns raised about the potential for some of these practices to perpetuate harmful cultural beliefs or stigma surrounding mental health issues. As a mental health professional noted, "While some traditional practices can be complementary, it's crucial to ensure that they do not replace or undermine evidence-based mental health treatments."

V. Discussion

The findings of this research paper highlight the significant burden of mental health challenges faced by women in India and the complex interplay of socio-cultural factors contributing to these challenges. The high prevalence of conditions such as depression, anxiety disorders, and trauma-related disorders among Indian women is alarming and indicative of the need for concerted efforts to address this public health issue.

The socio-cultural factors identified in this study, including gender roles and patriarchal norms, domestic violence, poverty, and stigma surrounding mental health, create a complex web of challenges that exacerbate women's vulnerability to mental health problems. These factors not only contribute to the development of mental health issues but also create barriers to seeking help and accessing support services.

The limited availability of mental health resources and infrastructure in India, particularly in rural and remote areas, further compounds the challenges faced by women seeking mental health support. The shortage of trained mental health professionals, lack of integration of mental health services into primary healthcare systems, and geographic barriers highlight the urgent need for increased investment and capacity building in the mental health sector.

Furthermore, the findings emphasise the importance of addressing the socio-cultural determinants of women's mental health challenges. Efforts to promote gender equality, challenge harmful cultural norms and practices, and empower women economically and socially are crucial for improving mental health outcomes. Initiatives aimed at raising awareness and destigmatising mental health issues are also essential to encourage help-seeking behaviour and facilitate access to support services.

Integrating traditional and alternative healing practices with modern mental health services presents opportunities and challenges. While some of these practices may offer complementary benefits for mental well-being, it is crucial to ensure that they do not perpetuate harmful cultural beliefs or stigma surrounding mental health issues. Collaboration and integration with evidence-based mental health treatments are necessary to provide comprehensive and culturally appropriate support to women.

The findings of this research paper have important implications for policy, practice, and future research. Policymakers must prioritise the development of comprehensive and gender-responsive mental health policies and programs that address the unique needs and challenges faced by women in India. Increased investment in mental health infrastructure, capacity building, and community-based initiatives is crucial to improve access to mental health services, particularly in underserved areas.

Furthermore, the integration of mental health services into existing healthcare systems, such as primary healthcare centres and maternal and child health programs, can facilitate early detection and intervention for women's mental health issues. Collaboration with NGOs, community organisations, and traditional healers can also help bridge the gap between formal mental health services and culturally appropriate support systems.

In terms of practice, mental health professionals and service providers must adopt a trauma-informed and gender-sensitive approach when working with women experiencing mental health challenges. Culturally appropriate and accessible mental health services that address the specific needs and experiences of women are essential. Additionally, interventions aimed at empowering women, promoting their economic and social inclusion, and challenging harmful gender norms and practices can contribute to improved mental health outcomes.

Future research in this area should continue to explore the intersections of gender, culture, and mental health, as well as the effectiveness of various interventions and support services tailored to the diverse needs of Indian women. Longitudinal studies examining the long-term impacts of mental health challenges on women's well-being, economic productivity, and overall development would provide valuable insights. Additionally, research exploring the potential of integrating traditional and alternative healing practices with evidence-based mental health treatments could contribute to developing culturally relevant and holistic support systems.

VI. Conclusion

This research paper has provided a comprehensive exploration of the mental health challenges faced by women in India, the socio-cultural factors contributing to these challenges, and the availability and accessibility of mental health support services. The findings highlight the alarmingly high prevalence of mental health conditions such as depression, anxiety disorders, and trauma-related disorders among Indian women, exacerbated by factors such as gender-based discrimination, domestic violence, poverty, and stigma surrounding mental health issues.

Access to quality mental health services remains a significant challenge, particularly in rural and marginalised communities, due to limited resources, infrastructure, and barriers such as financial constraints, geographic accessibility, and cultural attitudes towards mental health.

Addressing women's mental health challenges in India requires a multi-pronged approach that involves policy interventions, community engagement, capacity building, and addressing the underlying socio-cultural determinants. Promoting gender equality, empowering women economically and socially, challenging harmful cultural norms and practices, and raising awareness about mental health are crucial steps in creating an enabling environment for women's mental well-being.

Increased investment in mental health infrastructure, integration of mental health services into primary healthcare systems, and capacity building of mental health professionals are essential to improve access and quality of care. Additionally, collaboration with traditional and alternative healing practices while ensuring alignment with evidence-based approaches can contribute to developing culturally appropriate and holistic support systems.

Ultimately, promoting women's mental and psychological well-being is not only a matter of individual wellbeing but also a critical factor in achieving gender equality, empowerment, and overall societal development in India. By addressing the mental health needs of women, we can unlock their full potential, foster their participation in various spheres of life, and contribute to the overall progress and prosperity of the nation.

Future research should continue to explore the intersections of gender, culture, and mental health, as well as the effectiveness of various interventions and support services tailored to the diverse needs of Indian women. Longitudinal studies examining the long-term impacts of mental health challenges on women's well-being, economic productivity, and overall development would provide valuable insights. Additionally, research exploring the potential of integrating traditional and alternative healing practices with evidence-based mental health treatments could contribute to developing culturally relevant and holistic support systems.

It is crucial to acknowledge that addressing women's mental health challenges is not only a public health priority but also a fundamental human rights issue. Women have the right to live with dignity, free from discrimination, violence, and barriers to accessing essential services, including mental health support. By prioritising women's mental health and psychological well-being, we can create a more equitable and inclusive society that values and empowers all individuals, regardless of gender.

In conclusion, this research paper has shed light on the complex and multifaceted nature of women's mental health challenges in India. While the findings reveal significant obstacles and gaps, they also highlight opportunities for transformative change through concerted efforts from policymakers, healthcare providers, communities, and individuals. By fostering a compassionate and inclusive approach, challenging harmful cultural norms, and investing in comprehensive mental health support systems, we can pave the way for a future where women in India can thrive and reach their full potential, free from the burdens of mental health challenges.

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