

WP(MD) 16484/2020

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1. K.R. RAJA [ PETITIONER ]  
23 C-1 SAMPATH COMPOUND BESANT RD  
CHINNACHOKKIKULAM MADURAI-2

VS

1.THE STATE OF TAMILNADU [ RESPONDENT ]  
THE ADDL. CHIEF SECRETARY HOME DEPT.  
SECRETARIAT FORT ST. GEORGE CHENNAI-09

2.THE STATE OF TAMIL NADU REP  
. BY THE PRL. SECRETARY HEALTH AND FAMILY  
WELFARE DEPT. SATE OF TAMIL NADU  
SECRETARIAT FORT ST. GEORGE CHENNAI-09

3.THE DIRECTOR GENERAL OF PRISONS AND CORRECTIONAL  
SERVICES DEPT. OF  
PRISONS AND CORRECTIONAL SERVICES TAMIL NADU  
NO.6 WHENNALS RD EGMORE CHENNAI-08

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PRAYER

TO ISSUE A WRIT OF MANDAMUS DIRECTING THE RESPONDENTS TO SET UP A MEDICAL WING IN EITHER TRICHY CENTRAL PRISON OR MADURAI CENTRAL PRISON EXCLUSIVELY TO PROVIDE MENTAL HEALTH CARE FACILITIES TO THE PRISONERS WITH MENTAL ILLNESS AND WITH ROUND THE CLOCK AVAILABILITY OF TRATMENT BY THE PSYCHIATRIST CLINICAL PSYCHOLOGIST PSYCHIATRIC SOCIAL WORKERS MENTAL HEALTH NURSES AND OTHER PARAMEDICAL STAFFS LIKE INSTITUTE OF MENTAL HEALTH SETUP IN A CENTRAL PRISON AS PER SECTION 103 AND OTHER RELEVANT PROVISIONS OF THE MENTAL HEALTH CARE ACT 2017 IN ACCORDANCE WITH LAW.

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N.KIRUBAKARAN,J.  
AND  
B.PUGALENDHI,J.

**ORDER**

(Order of the Court was made by N.KIRUBAKARAN,J.)

**“It is shocking to note that India is the most depressed country in the world”.** According to the World Health Organisation (in short 'WHO'), it is stated that over 90 Million Indians, viz., 7.5% of the country's population, are suffering from some form of mental illness. China and USA stand in Nos.2 and 3. In India, every 7<sup>th</sup> person suffers from some form of mental illness. Mental illness is considered as a leading contributor to disease burden and morbidity worldwide and may even result in suicide if left untreated.

2.All psychological problems are treatable, curable and preventable, provided we identify the illness early and initiate the treatment quickly coupled with appropriate rehabilitation. But unfortunately the prevalence of mental illness has doubled in the past 10 years because of the following facts:

- a) Lack of awareness & knowledge about the illness
- b) Inadequate human resources (less number of psychiatrists, psychologists, social workers and nurses)

- c) Inadequate treatment facilities.
- d) Long distance to travel to get the treatment.
- e) High cost of treatment
- f) Stigma

All these above factors contribute to the non-compliance of mental health services even for the middle class families which result in a treatable illness becoming untreatable and curable illness becoming incurable.

3. A Research, “**The Burden of Mental Disorders Across the States of India : The Global Burden of Disease Study 1990 – 2017**”, published on December 23, 2019, at Pages 148 – 161, of Volume 7, Issue 2, of **Lancet Psychiatry** concluded as follows:

*“In conclusion, mental disorders adversely affect a large proportion of Indians. Given the poor coverage of mental health services, the lack of awareness, and the stigma attached to mental disorders in the country, India needs to invest heavily in mental health services to facilitate prevention where possible and to provide affordable treatment, care, and rehabilitation, as well as to attempt integration of mental and physical health services. The state-specific data trends in this report can be useful for mental health policies and programme planning at the individual state level and for India as a whole.”*

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4. WHO predicts that by the end of this year (2020), approximately 20% of the Indians will suffer from mental illness. 56 Millions of Indians are suffering from depression and another 38 Millions of Indians are suffering from anxiety disorders. It also estimates that the economic loss in India due to mental health condition during 2012-2013 is 1.03 Trillions of 2010 Dollars.

5. A Survey “**National Mental Health Survey of India, 2015-2016**”, conducted by National Institute of Mental Health and Neuro Sciences (NIMHANS), Bengaluru, in collaboration with the Ministry of Health and Family Welfare, Government of India, revealed that 10.6% or 150 million Indians suffer from mental disability and need active help. Further, 9.8 Millions of teenagers in the age group of 13 – 17 years suffer from depression and other mental health disorders and they are in need of active intervention.

6. In 2019, a study conducted by a British Charity, “**Mental Health Research – UK**” found that 42.5% of employees in India's Corporate Companies suffer from depression or anxiety disorder.

7. When such is the given situation on the mental health front, only a very negligible amount is being allotted and spent towards mental health. It is stated that India's mental health care budget in 2018 was 528 Million Rupees, out of

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which, 500 Million Rupees was for mental health. In 2019, it is stated to have been reduced to 400 Million Rupees. As per the media reports, India actually spent 50 Million Rupees only on mental health. The amount spent on mental health comes to 33 paisa for mental health patient, given the number of 150 Million people requiring urgent care. It is reported in Parliament in March 2020 that a sum of 48 Crores Rupees only has been spent on mental health in the year 2018-2019, which approximately comes to Rs.2.40/- per patient in a year or approximately, 20 paisa per month per patient.

8. The Mental Health Force also is very low in India and it is stated that there are about only 9000 psychiatrists, viz., one psychiatrist for every one lakh people alone is available, whereas the required number of psychiatrists is three for every one lakh people. It is stated that there is a shortage of 18,000 mental health doctors or psychiatrists and our country requires about 2700 new psychiatrists every year. That apart, only 49 child psychiatrists take care of children of the entire country.

9. Though the Government, understanding the mental health problems, passed an Act, called “The Mental Healthcare Act, 2017”, no sufficient awareness programmes have been conducted. The taboo/social stigma attached to the persons with mental illness prevents the people to take proper treatment.

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Therefore, it is required to dispel the stigma attached to the mental illness or taking treatment under a psychiatrist or counselling with a psychologist by anti-stigma awareness plans. The people should be sensitised that mental disorder is like any other normal disease which is required to be treated, failing which, dangerous consequences would follow.

10. Though the Government recognised the prevalence of mental disorders on a large scale and the Union of India passed the Mental Healthcare Act, 2017 with an aim to provide the mental healthcare services for the persons with mental illness and to ensure that these persons have a right to life with dignity by not being discriminated against or harassed, however, as stated above, there is no sufficient budgetary allocation for the mental healthcare which is required to be increased as one among seven persons is suffering from mental health disorders.

11. Though the people are more health conscious, the mental health is not identified, recognised and physical health alone is taken care of including medical insurance. Unless people's mental health is good and balanced, people cannot be normal and cannot lead dignified life. Therefore, it is the primary duty of the Governments to concentrate on the mental health of the people by having sufficient number of psychiatrists, psychologists, mental health workers and hospitals and other required infrastructures.

12. There is only one research Centre in the country, in mental health, called “National Institute of Mental Health and Neuro Sciences” (NIMHANS) at Bengaluru, which is a dedicated medical institution established in 1925. No such premier institution for mental health has been established after 1925. Every zone should have an institution like, NIMHANS. Similarly, psychiatry is not a subject in all the medical colleges and hence, psychiatry should be introduced in every medical college as the requirement of psychiatrists is more. Similarly, only a negligible number of mental hospitals are stated to be functioning in the country and for 130 Crore of population, more number of mental health care centres have to be established by the Central Government as well as by all the State Governments.

13. It is stated that the Government does not have the centralised portal on treatment for the mental disorders and only they have patient based data from three Central Institutes of Mental Health. In regular intervals, surveys of the prevalence of mental disorders across India have to be conducted and appropriate remedial measures have to be taken.

14. When such is the given scenario about the mental health, the present Public Interest Litigation has been filed seeking a writ of Mandamus, directing the respondents to set up a Medical Wing either in Trichy Central Prison or

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Madurai Central Prison exclusively to provide mental health care facilities to the prisoners with mental illness and with round the clock availability of treatment by Psychiatrists, Clinical Psychologists, Psychiatrist Social Workers, Mental Health Nurses and other Para Medical Staffs, like, Institute of Mental Health set up in a Central Prison as per Section 103 and other relevant provisions of the Mental Healthcare Act, 2017, in accordance with law within the time stipulated by this Court.

15. It is contended by the petitioner that there is no exclusive Medical Wing in Trichy Central Prison or Madurai Central Prison to provide mental health care facilities to the prisoners with mental illness as per Section 103 of the Mental Healthcare Act, 2017.

16. Apart from the prayer sought for by the petitioner, as mentioned above, this Court would like to expand the scope of the writ petition to give comprehensive directions to the Central Government, Medical Council of India and the State Government to identify the patients at the earliest by diagnosing the disease to give proper treatment by improving the infrastructures, like, establishment of hospitals, increasing the number of psychiatrists, psychologists, psychiatrist social workers and allocation of more funds towards mental health, including the conduct of regular surveys.

17. Due to change in lifestyle and growth in economy and increase in the standard of living, the lifestyle got changed and consumption of alcohol also increased. It is stated that the youngsters including the school children have been addicted to alcohol and drugs. Alcohol and drugs also contribute to the mental illness, which is required to be addressed appropriately. Similarly, many families are breaking away, because of lack of mental adjustment or behavioural problems due to psychological disorders. It is evident from the number of cases coming before this Court. Therefore, it is the need of the hour to have a Psychiatry Department in every District Headquarters Hospital and a Psychiatrist in every Taluk Level Hospital.

18. Any psychiatric treatment will not be complete without rehabilitation. So rehabilitation is an essential component in psychiatric treatment. For a country like India, community based rehabilitation is the only alternative to address this issue. Many people will not come forward to start the rehabilitation services because it is not a profit making venture and therefore, they should be encouraged. Steps have to be taken by the Governments

- i) to improve the man power.
- ii) to increase mental health service provision platforms.
- iii) to make basic mental health care easily accessible to the

common man.

iv) to reduce the treatment cost.

v) To reduce and overcome the stigma.

19. Therefore, this Court, *suo motu*, impleads,

(i) Union of India, represented by its Secretary, Ministry of Family and Health Welfare, New Delhi;

(ii) Union of India, represented by its Secretary, Ministry of Finance, New Delhi;

(iii) Medical Council of India, New Delhi;

(iv) University Grants Commission, New Delhi;

(v) National Institute of Mental Health and Neuro Sciences (NIMHANS), Hombegowda Nagar, Bengaluru, Karnataka. [email id: ms@nimhans.kar.nic.in]

(vi) Indian Psychiatric Society (IPS), Plot No.43, Sector 55, Gurugram, Haryana - 122 003 [email id: ipssecretaryoffice@gmail.com]

as the respondents 4 to 9 in this writ petition. Registry is directed to carry out necessary amendments in the cause title.

20. Mrs.J.Padmavathi Devi, learned Special Government Pleader takes notice on behalf of the respondents 1 to 3 and Mrs.Victoria Gowri, learned Assistant Solicitor General of India takes notice on behalf of the newly

impleaded respondents 4 and 5. Mr.K.K.Senthil, learned Counsel takes notice on behalf of the newly impleaded sixth respondent. Mr.N.Dilipkumar, learned Standing Counsel takes notice on behalf of the newly impleaded seventh respondent.

21. Considering the facts and circumstances of the case, the following queries are raised:

- a) Is it a fact that one in seven persons of India's population is suffering from mental illness as stated by WHO?
- b) Whether any survey is being conducted by the Government or Government Hospitals / Health Organisations regarding the mental health of the India's population regularly?
- c) When such survey was conducted lastly?
- d) What are all the leading mental disorders among the people?
- e) Whether sufficient number of mental hospitals are available in India?
- f) If not, why not the Central Government/State Governments establish one mental hospital in each District or in each Zone of every State?
- g) Why not the respondents increase the number of Institutes offering psychiatry/psychology in higher studies?
- h) Why not the Central Government establish premier Institutes, like, National Institute of Mental Health and Neuro Sciences (NIMHANS),

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Bengaluru, in each Zone of the country, namely, North, East, West and Central?

- i) Is it a fact that only 50 Million Rupees have been spent for the mental healthcare in 2019?
- j) Why not the Central Government increase the allocation of funds towards mental health, especially, when one in seven persons of the population of the country is stated to be suffering from mental illness?
- k) What is the required strength of psychiatrists, psychologists and/or psycho health workers in India?
- l) Why not the Governments sensitise the people about the mental illness and remove the taboo/social stigma in the minds of the general public about the persons with mental illness and also the treatment for mental illness through Audio-Video programmes by conducting awareness camps?
- m) Why not the data for co-ordinated action be collected by the Central Government and the State Government in the interest of the people suffering from mental illness?
- n) Why not the Governments have one Department for Psychiatry in each District Headquarters Hospital and have at least one Psychiatrist in each Taluk Level Hospital?

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- o) Why not Central Government engage the services of Foreign Psychiatrists, Psychologists to teach and train medical students?
- p) What steps Government has taken to establish the rehabilitation services?
- q) What are the incentives given for starting the rehabilitation services?
- r) What steps Government has taken to promote community based rehabilitation?
- s) Do we have sufficient rehabilitation professionals to manage rehabilitation homes?
- t) What is the Government budget for rehabilitation?
- u) What is the status of insurance coverage of mental illness?
- v) What are the steps taken to promote school mental health and community based mental health services?

22. The above queries have to be answered in the next hearing. All the respondents are directed to give their response at the earliest in the next date of hearing, viz., **09.12.2020**.

23. Notice to the newly impleaded respondents 8 and 9 returnable by **09.12.2020**. Private notice in all possible modes, including email, is permitted.

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24. List the matter on 09.12.2020 in the motion list.

Index : Yes/No  
Internet : Yes/No  
RSB/SJ

(N.K.K.,J.) (B.P.,J.)  
27.11.2020

**Note:** *In view of the present lock down owing to COVID-19 pandemic, a web copy of the order may be utilized for official purposes, but, ensuring that the copy of the order that is presented is the correct copy, shall be the responsibility of the advocate/litigant concerned.*

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B.PUGALENDHI,J.

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