

# UPSC EDITORIAL ANALYSIS 08 JUN 2021

## EDITORIAL 1: TOWARDS A STRONGER MENTAL HEALTH STRATEGY

Topic: General Studies Paper-2 (Health Sector)

### Context:

- According to World Health Organization (WHO), Mental health issues a major health challenge in the world today and they reduce the life expectancy of patients by 10-25-years. About 72% of member states have a standalone policy for mental health.
- National Mental Health Policy (NMHP) was introduced in India in 2014, and a rights-based Mental Healthcare Act in 2017, which replaced the Mental Healthcare Act of 1987.
- The NMHP, National Health Mission, National Adolescent Health Programme, and Ayushman Bharat have the necessary components to address the mental health issues of all sections of the population, however, the recent pandemic has exacerbated mental illnesses everywhere.



### Mental health indicators

- According to The Lancet Public Health (2019) report, median mental health spending across the world was around 2% of the total government health expenditure in 2015.

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- Further, In the case of low-income countries, it was around 0.5% of their health budget, for lower-middle-income countries, it was 1.9%, for upper-middle-income countries it was 2.4%, and for high-income countries, 5.1%.
- There is a higher allocation in developed countries than in developing countries for Mental health expenditure.
- Government expenditure on hospitals dealing with mental health issues is just 1.3% of total government expenditure on mental health in developing countries, while in developed countries, it ranges from 3% to 15%.
- According to WHO, In India and other developing countries, the share of mental hospitals per 1,00,000 population is as low as 0.01 due to the lack of focussed attention given to mental health.
- India has ranked 114th in the distribution of mental health units in general hospitals (per 1,00,000 population) globally,
- It is at 99th position in the distribution of mental health outpatient facilities (per 1,00,000 population), with 0.18 units per 1,00,000 population.
- It is at 64th position in the distribution of mental health day treatment facilities (per 1,00,000 population).
- In developed economies, there has been a growth of community healthcare facilities in line with the increase in patients with mental health issues.
- Based on The distribution of community residential facilities globally, India is at the 58th position, with 0.017 units per 1,00,000 population among the WHO member countries.
- India was ranked 107 with 0.292 per 1,00,000 population.
- In India, Nurses, social workers and psychologists working in the mental health sector (per 1,00,000 population) is 0.796, 0.065, and 0.069, respectively, while in developed countries in these three areas have 150.3, 145.4, and 222.6 per 1,00,000 population.
- India's ranking in this context was 97, 79 and 104, respectively.

## Mental illnesses

- Mental illnesses include anxiety disorders, psychotic disorders, mood disorders, substance use disorders, personality disorders and eating disorders, depressive and anxiety disorders, schizophrenia and bipolar disorder.
- The majority of suicides in the world are due to psychiatric problems or the illnesses listed above.
- Death by suicide is a complex phenomenon and Globally, the suicide rate was 10.6 per 1,00,000 population whereas, in India, it was 16.3 per 1,00,000.
- Further, The suicide rate was higher among males compared to females.
- Mental health may not be the primary concern in developing economies like India as there are many other communicable and non-communicable diseases that are more prevalent and need to be addressed.
- Further, challenges regarding funding, delivery of mental health packages, lack of trained staff, etc. have to be addressed as in the recent Pandemic, mental health issues are widely prevalent among the Indian population due to lockdowns.
- According to the 2017, Lancet Report, one in seven people in India had a mental disorder ranging from mild to severe.

- Also, the proportional contribution of mental disorders to the total disease burden had doubled between 1990 and 2017.
- This situation was generally worse in the southern states compared to the northern states due to the nature of development, modernisation, urbanisation and other factors. Depressive disorders were more prevalent among females than males which may be due to sexual abuse, gender discrimination, stress due to antenatal and postnatal issues and other reasons.

### **Additional measures for India:**

- To address mental health issues, India could reduce the treatment gap for mental disorders, increase the number of personnel in the mental health sector, work towards reducing discriminatory attitudes, and devise an integrated approach for detecting, treating, and managing patient needs.
- Increased counselling facilities, especially in rural areas, with special support for women through the provision of women doctors, may help to reduce depressive disorders among Women.
- More telemedicine, telephone-based helpline numbers, and mental health apps could help. Communities and families can also help to address Mental health through community-based programmes and School-based programmes on mental health which can improve the mental health of children.
- More fund allocation for treatment of mental health, especially to those States in need of funds would help.
- The pandemic has provided the opportunity to explore various policy options including creating online mental health awareness which should be thought about and implemented.

### **Conclusion:**

- ✓ There needs to be a road map for mental health awareness which includes the traditional media, government programmes, the education system, industry, and social media. It is high time that industry and private sector companies set up counselling facilities while the Media and Government improve in their actions.
- ✓ Research and Funding should be increased to address Mental health disorders and help its patients by giving them the appropriate treatment.

### **Reference:**

<https://www.thehindu.com/opinion/op-ed/towards-a-stronger-mental-health-strategy/article34755470.ece>

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## EDITORIAL 2: BEIJING'S BELLIGERENCE AND DHAKA'S PUSHBACK

Topic: General Studies Paper-2 (India and its Neighborhood)

### Context:

- China once again displayed its 'wolf warrior' diplomacy by issuing a warning to Bangladesh. According to China, the Quad initiative of the U.S, Japan, Australia and India is an anti-China initiative, and if Bangladesh supported the quad, there would be "substantial damage" in bilateral ties between China and Bangladesh.



### Revealing fault lines

- On Chinese warning, Bangladesh Foreign Minister A.K. Abdul Momen publicly challenged the Chinese envoy's statement, by stating that Dhaka pursues an independent foreign policy, Chinese can say what they want, We would also listen to what they say, but decide what is good for us."
- However, later the Chinese said that it didn't mean to hammer bilateral relationship, it was just expressing opposition to small cliques and bloc politics.
- Chinese statement had repercussions far beyond Bangladesh, even U.S. State Department remarked that "What we would say is that we respect Bangladesh's sovereignty and we respect Bangladesh's right to make foreign policy decisions for itself."

- This episode captures the emerging fault lines in South Asia and the Indo-Pacific in ways that are both revealing and challenging.
- Though China is making all its attempts to play down the relevance of the Quad, Beijing has to realise that grouping is emerging as a reality and there is little it can do to prevent that.
- China is agitated about Quad's future role and its potential success in offering the regional states an alternative to its strong-arm tactics.

### **The Quad:**

- The Quad member states are busy figuring out a cohesive agenda amongst themselves and there are no plans for an expansion.
- There is a desire to work with like-minded nations but that can only happen if the four members of the Quad can build a credible platform first.
- Though still, no member has agreed to join Quad, its rejection by China has been understood by other states who may harbour any desire of working closely with the Quad members for a rules-based order in the Indo-Pacific.

### **The growing momentum of Quad**

- The aggressive diplomacy between China and Quad may have the opposite effect, but that is for the future.
- At present, Beijing has failed to prevent nations from the West to the East from coming out with their Indo-Pacific strategies, it has also failed to prevent the operationalisation of the Quad, and now China is worried that other nations in the region thinking of engaging with the Quad may join Quad proactively after its failure.

### **Conclusion:**

- ✓ As the Quad gains, more momentum and the churn in the waters of the Indo-Pacific may lead to new countervailing coalitions against China, Beijing's belligerence can only be expected to grow.
- ✓ Further, when regional interlocutors try to create an exclusive foreign policy, Beijing may demand clear-cut foreign policy choices from its regional interlocutors, as it did with Bangladesh.
- ✓ However, Dhaka's robust response makes it clear, states are more likely to push back than become subservient to Chinese threats.

### **Reference:**

<https://www.thehindu.com/opinion/op-ed/beijings-belligerence-and-dhakas-pushback/article34755663.ece>

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